

CDBG Applications Summary 2025-2026

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CORA

City: [Help with this page](#)

Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

[Return to Main Page](#)**Renewal Application for FY 2025-26**

<input type="text" value="Redwood City"/>	<input type="text" value="County of San Mateo"/>	<input type="text" value="South San Francisco"/>
Status:	Status:	Status: <input type="text" value="Choose:"/>

Comments:

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to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.**GENERAL INFORMATION**

1. Project Title:

2. Project Address: City: Zip:

3. Provide a one sentence project summary:

To provide operating assistance for CORA's Safe Houses (emergency shelters) providing victims and survivors of domestic violence and their children with a confidential and safe living environment for up to six months.

4. Organization Name:

Organization Address: City: Zip:

Organization Phone: Website:

Type of Applicant: Does your agency serve: ☒ Persons, or ☐ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:

Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:

Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:

Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: ([Get a UEI #](#)) Federal EIN/TIN Number:

Funding received from:☒ Redwood City ☐ City of San Mateo ☒ County of San Mateo ☒ South San Francisco**10. Project Specific Narrative:** Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

This application is in support of CORA's Safe Houses which serve individuals (and their children) who are fleeing domestic violence and need immediate, safe housing. CORA's Safe Houses are part of the agency's overall effort to progressively engage clients at risk of homelessness. CORA's Safe House Program provides emergency hotel services, emergency transportation services, emergency food support, and more. Clients are able to receive client-led case management, emotional support and peer counseling, access to internal and external resources to meet their individual needs, and other supportive services.

From hotel vouchers to longer term housing subsidy vouchers, CORA provides customized levels of housing assistance that preserve the most expensive interventions for households with the most severe barriers to housing. A primary goal of Safe House staff is to help clients build into their lives safety and self-sufficiency. Toward this end, staff use a trauma-informed model of service, which incorporates an understanding of the impact of trauma, into all aspects of service. Using a trauma-informed approach assists survivors in strengthening their own psychological capacities so they can rebuild their lives.

11. Program Changes: Please detail any changes to your program for FY2025.

Beginning in FY2025, CORA's Safe Houses will have staff available onsite at the Safe House 7 days a week, whereas staff were only onsite 6 days a week prior. By having staff available 7 days a week, staff are able to be more available for clients to provide client-led case management, conduct phone assessments of referred clients, conduct intakes into the safe house, and more.

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q1)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	15	11	9	9	11	10	11.00	10.00
City of San Mateo	0	0	0		0	0	0.00	0.00
County of San Mateo	74	49	60	60	26	16	26.00	16.00

South San Francisco	5	4	4	4	3	3	3.00	3.00
Totals	94.00	64.00	73.00	73.00	40.00	29.00	40.00	29.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request, However, please take into consideration that this amount is most likely to stay the same or decrease

				Redwood City		County of San Mateo		South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	%	Requested	%	Requested	Pgm%	Requested
Labor Lines needed: <input type="text" value="1"/>											
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>											
Salary & wages	\$598,592	18.26%	\$109,318	0.00%	\$0	15.26%	\$16680.00	15.28%	\$16,704	30.54%	\$33,384.00
Taxes/Benefits	\$134,683	20.08%	\$27,044	0.00%	\$0	5.55%	1501	5.56%	\$1,503	11.11%	\$3,004.00
Supplies Lines needed: <input type="text" value="1"/>											
Program Supplies	45000	6.67%	3000	100.00%	3000	0.00%		0.00%		100.00%	\$3,000.00
Materials Lines needed: <input type="text" value="0"/>											
Operations/Maintenance Lines needed: <input type="text" value="2"/>											
Repair & Maintenance	50000	30.00%	15000	36.67%	5500	0.00%		0.00%		36.67%	\$5,500.00
Utilities	75,000	13.33%	10000	65.06%	6506	0.00%		0.00%		65.06%	\$6,506.00
Agency Administration					0		1819		1793		\$3,612.00
Indirect Costs Rate											
Indirect Costs	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
TOTAL	\$903,275.00	18.20%	\$164,362.00	9.13%	\$15,006.00	12.17%	\$20,000.00	12.17%	\$20,000.00	33.47%	\$55,006.00
Amount Funded 2025					\$15006		\$20000		\$20000		
Number of Individual Beneficiaries					11.00		26.00		3.00		40.00
Cost per Individual					\$1,364.18		\$769.23		\$6,666.67		\$1,375.15
Number of Household Beneficiaries					10.00		16.00		3.00		29.00
Cost per Household					\$1,500.60		\$1,250.00		\$6,666.67		\$1,896.76

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

Redwood City FY25-26 CDBG funding will provide funding for the Safe House program's supplies, repair & maintenance, and utilities costs.
County of San Mateo FY25-26 CDBG funding will help pay CORA's Facilities Coordinator, Wesley Wagner's salary and benefits as well as 1% of CORA's admin costs.
South San Francisco FY25-26 CDBG funding will help pay CORA's Facilities Coordinator, Wesley Wagner's salary and benefits as well as 1% of CORA's admin costs.

Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are **current** before submitting Renewal Application

- ☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors [Board Resolutions County RWC SSF.pdf](#)
- ☒ 2. Proof of 501(c)3 / tax-exempt status [501c3letter-9-5-2023 438 PM.pdf](#)
- ☒ 3. By-laws [Bylaws as Adopted by CORA Board of Directors v3-1-15-2024 625 PM 1.doc](#)
- ☒ 4. Articles of Incorporation [Articles of incorporation Certificate of Amendment-1-15-2024 618 PM 1.pdf](#)
- ☒ 5. Board roster, including: [CORA Board Roster terms meeting dates.pdf](#)
 - Name, Company, Years on Board
 - Meeting dates for previous 12 months
 - Number of years allowed for each board term
- ☒ 6. Organizational chart for entire organization [12.15.24 Org Chart.pdf](#)
- ☒ 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA: [CORA 2024 - Financial Statements - FINAL.pdf](#)
 - Management letters
- ☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit. [CORA 2024 - Single Audit - FINAL.pdf](#)
- ☒ 9. The following are required: [CORA org and program budgets.pdf](#)
 - Current (FY24-25) **Agency** Operating Budget
 - Proposed (FY25-26) **Agency** Operating Budget
 - Current (FY24-25) **Program** Operating Budget
 - Proposed (FY25-26) **Program** Operating Budget
- ☒ 10. Mission Statement [CORA Mission Statement.pdf](#)
- ☒ 11. Non-discrimination policy [Reasonable Accommodation Policy-clients and-staff-1-16-2024 631 PM 1.pdf](#)
- ☐ 12. Reasonable Accommodations Policy [CORA Code of Ethics and Conduct.pdf](#)
- ☒ 13. Other - [CORA full request budget for 49999.pdf](#)

(Your application will be saved)

Application Submitted by: Cindy Kilpatrick Date: 01/21/2025

Save As Draft

Click above to return application to Draft status, and please enter a reason in the box below

Reviewed and accepted by City of South San Francisco:

Sign Here:

Certify Application as Complete Approval


status

Redwood City ,No

County of San Mateo ,No

South San Francisco ,No

Reset

 xyz

Initially submitted: Jan 21, 2025 - 06:14:34

Friends for Youth

City: [Help with this page](#)

Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

[Return to Main Page](#)**Renewal Application for FY 2025-26**

City of San Mateo	County of San Mateo	South San Francisco
Status:	Status:	Status: Choose: <input type="text" value="v"/>

Comments:

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.**GENERAL INFORMATION**

1. Project Title:

2. Project Address: City: Zip:

3. Provide a one sentence project summary:

Friends for Youth provides quality mentoring relationships for underserved youth across San Mateo County schools and community partner sites, with the goal of empowering youth to be mentally and behaviorally healthy, emotionally secure, and equipped with responsible decision-making, social, emotional and resiliency-building skills.

4. Organization Name:

Organization Address: City: Zip:

Organization Phone: Website:

Type of Applicant: Does your agency serve: ☐ Persons, or ☒ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:

Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:

Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:

Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: ([Get a UEI #](#)) Federal EIN/TIN Number:

Funding received from:☐ Redwood City ☒ City of San Mateo ☒ County of San Mateo ☒ South San Francisco**10. Project Specific Narrative:** Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

Friends for Youth (FFY) is a nationally recognized, award winning direct-service agency with over four decades of measurable success in mentoring and a 100% safety rating. Through our 1-to-1 and site-based group mentoring programs, FFY provides quality mentoring relationships for underserved youth who need support most, with the goal of empowering them to be mentally and behaviorally healthy, emotionally secure, and equipped with resiliency-building skills. FFY sees social and emotional learning as a critical component of present and future success. Adverse childhood experiences and trauma create additional barriers for youth, making it more difficult for them to envision positive futures for themselves. Before thinking about college or careers, we help youth think about themselves and their needs holistically. Our proprietary social and emotional learning (SEL) curriculum helps students develop skills and takeaway tools for each of the core social and emotional competencies: self-awareness, self-management, social awareness, relationships skills, and responsible decision making. It is our belief that through the power of mentoring, we can improve the lives of our young people who need someone in their corner.

11. Program Changes: Please detail any changes to your program for FY2025.

Friends For Youth is starting their group mentoring program at Martin Elementary School in South San Francisco in the school year 2024-2025. Friends For Youth has also created and implemented a Social Emotional Learning (SEL) curriculum in Spanish in an attempt to serve more bilingual youth and break through language barriers. Finally, Friends For Youth had the following staffing changes: one 1-to-1 program coordinator left our organization, and two program coordinators were hired as full time staff. These changes have been reflected in the 24-25 program budget.

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program, For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q1)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	0	0		0.00	0	0	0.00	0.00
City of San Mateo	361	288	268	64.00	4	1	260.00	70.00
County of San Mateo	0	0	160	457.00	52	13	2,400.00	552.00

South San Francisco	77	22	77	28.00	0	0	80.00	28.00
Totals	438.00	310.00	505.00	549.00	56.00	14.00	2,740.00	650.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request, However, please take into consideration that this amount is most likely to stay the same or decrease

				City of San Mateo		County of San Mateo		South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	%	Requested	%	Requested	Pgm%	Requested
Labor Lines needed: 10											
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>											
Executive Director	\$144,338.00	50.00%	\$72,169.00	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Director of Operations	\$95,292.00	60.00%	\$57,175.20	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Group Program Manager- JC	\$70,958.00	100.00%	\$70,958.00	7.05%	\$5,000	14.09%	\$10,000	2.82%	\$2,000	23.96%	\$17,000.00
Partnerships Manager- BJ	\$70,250.00	20.00%	\$14,050.00	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Program Coordinator 1- JM	\$55,583.00	100.00%	\$55,583.00	0.00%	\$0	9.00%	\$5,000	4.50%	\$2,500	13.49%	\$7,500.00
Program Coordinator 2- JS	\$55,792.00	100.00%	\$55,792.00	0.00%	\$0	8.96%	\$5,000	4.48%	\$2,500	13.44%	\$7,500.00
Program Coordinator 3- YC	\$55,792.00	100.00%	\$55,792.00	8.96%	\$5,000	8.96%	\$5,000	5.38%	\$3,000	23.30%	\$13,000.00
Program Coordinator 4- FV	\$55,583.00	100.00%	\$55,583.00	9.00%	\$5,000	9.00%	\$5,000	4.50%	\$2,500	22.49%	\$12,500.00
Development Coordinator- EN	\$55,583.00	40.00%	\$22,233.20	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Director of Partnerships	\$95,252	20.01%	\$19,058.40	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Taxes/Benefits	\$256,516.00	100.00%	\$256,516.00	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Supplies Lines needed: 4											
Mentor Screening/Training	\$5,000	100.00%	\$5,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Mentorship Activities	\$22,000	100.00%	\$22,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Mentor Recruitment/Managemen	\$15,000	100.00%	\$15,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Insurance	\$17,000	100.00%	\$17,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Materials Lines needed: 0											
Operations/Maintenance Lines needed:											
Agency Administration ?											\$0.00
Indirect Costs Rate											
Indirect Costs	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
TOTAL	\$1,069,939.00	74.20%	\$793,909.80	1.89%	\$15,000.00	3.78%	\$30,000.00	1.57%	\$12,500.00	7.24%	\$57,500.00
Amount Funded 2025					\$14100		\$30000		\$12500		
Number of Individual Beneficiaries					260.00		2,400.00		80.00		2,740.00
Cost per Individual					\$57.69		\$12.50		\$156.25		\$20.99
Number of Household Beneficiaries					70.00		552.00		28.00		650.00
Cost per Household					\$214.29		\$54.35		\$446.43		\$88.46

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

Each of our group mentoring programs sites requires the presence of at least 2 group program staff. It costs \$16.5k per group session for 10 to 15 students per school year. Program Managers are responsible for case management of school administrators, building partnerships for program expansion, collecting and maintaining attendance data, conducting program evaluations, curriculum development and activity planning. Program Coordinators are responsible for facilitating group sessions, providing weekly reports to school administrators, mentor recruitment screening and training, curriculum development and activity planning.

Attachments

(Upload Instructions)

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NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are current before submitting Renewal Application

- ☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors [SMC and Sunnyvale Authorization Document.doc](#)
- ☒ 2. Proof of 501(c)3 / tax-exempt status [FFY_501c3_tax_exempt_letter.pdf](#)
- ☒ 3. By-laws [Complete_with_DocuSign_FFY_Bylaws_Amended_Ja_2.pdf.pdf](#)
- ☒ 4. Articles of Incorporation [FFY_Articles_of_Incorporation.pdf](#)
- ☒ 5. Board roster, including:
 - Name, Company, Years on Board
 - Meeting dates for previous 12 months
 - Number of years allowed for each board term
- ☒ 6. Organizational chart for entire organization [2023_FFY_Organizational_Chart_and_Job_Matrix.pdf](#)
- ☒ 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA:
 - Management letters [2023_FFY_CPA_Financial_Report.pdf](#)
- ☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit. [Certification_of_Federal_Funds_under_750k.pdf](#)
- ☒ 9. The following are required: [2425_COMBINED_AGENCY_PROGRAM_BUDGET.pdf](#)

- Current (FY24-25) **Agency** Operating Budget
- Proposed (FY25-26) **Agency** Operating Budget
- Current (FY24-25) **Program** Operating Budget
- Proposed (FY25-26) **Program** Operating Budget

- ☒ 10. Mission Statement
- ☒ 11. Non-discrimination policy
- ☒ 12. Reasonable Accommodations Policy
- ☐ 13. Other -

[Screenshot_2024-01-18_at_2.14.46_PM.png](#)

[Non-Discrimination_Policy.pdf](#)

[Reasonable_Accommodations_Policy_.pdf](#)

(Your application will be saved)

Application Submitted by: Bhavya Jha Date: 01/21/2025

Save As Draft

Click above to return application to Draft status, and please enter a reason in the box below

Reviewed and accepted by City of South San Francisco:

Sign Here:

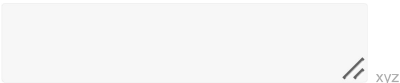
Certify Application as Complete

 Approval

status

City of San Mateo ,No
County of San Mateo ,No
South San Francisco ,No

Reset



Initially submitted: Jan 21, 2025 - 11:51:52

Human Investment Project (HIP) Housing



City:

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Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

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Renewal Application for FY 2025-26

City of San Mateo	South San Francisco
Status:	Status: Choose: <input type="text"/>
Comments:	

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.

GENERAL INFORMATION

1. Project Title:

2. Project Address: City: Zip:

3. Provide a one sentence project summary:

HIP Housing's Affordable Housing Programs are multifaceted and provide housing and/or case management support to individuals in the Home Sharing, Self-Sufficiency, and Housing Readiness Programs as well as in HIP Housing's owned or managed properties, all of which prevent homelessness, maintain housing affordability, and increase access to housing resources for those who live, work, or attend school in San Mateo County.

4. Organization Name:

Organization Address: City: Zip:

Organization Phone: Website:

Type of Applicant: Does your agency serve: ☐ Persons, or ☐ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:

Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:

Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:

Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: (Get a UEI #) Federal EIN/TIN Number:

Funding received from:

☐ Redwood City ☒ City of San Mateo ☐ County of San Mateo ☒ South San Francisco

10. Project Specific Narrative: Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

HIP Housing's Affordable Housing Programs prevent homelessness, maintain housing affordability, and increase access to housing resources.

The Home Sharing Program creates new affordable housing County-wide by matching people who have space in their home with people who are searching for an affordable place to live. Activities include: screening applicants; referring potential housemates to each other; guiding clients through the match process, and ongoing support after a match is made.

The Self-Sufficiency Program offers a 1-5 year rental scholarship and coaching support for low income parents and/or transitional age foster youth who are in school. Activities include: monthly case-management meetings to review budget, education, and parenting goals; Life Skills workshops; rent scholarship; mental health counseling; and referrals to community resources.

11. Program Changes: Please detail any changes to your program for FY2025.

HIP Housing and the County of San Mateo's Department of Housing and Housing Authority are partnering to provide housing solutions to older adults residing in a County-supported shelter through our Housing Readiness Program. As funding availability allows, HIP Housing will offer a housing scholarship to an older adult residing at the shelter to help subsidize their rent. In addition to the housing scholarship, the older adult will receive monthly case management from a case manager who will continue to help the older adult search for affordable housing so that they are not returned to the shelter system after the housing scholarship ends.

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q1)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	0	0			0	0		
City of San Mateo	0	0	25	20.00	3	3	25.00	20.00
County of San Mateo	0	0			0	0		

South San Francisco	0	0	40	35.00	21	14	40.00	35.00
Totals	0.00	0.00	65.00	55.00	24.00	17.00	65.00	55.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request. However, please take into consideration that this amount is most likely to stay the same or decrease

				City of San Mateo		South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	%	Requested	Pgm%	Requested
Labor Lines needed: 14									
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>									
Salaries	\$1,751,977	100.00%	1751977	0.00%		0.00%		0.00%	\$0.00
Bonus Expense	\$30,900	100.00%	30900	0.00%		0.00%		0.00%	\$0.00
Payroll Processing Fees	\$9,366	100.00%	9366	0.00%		0.00%		0.00%	\$0.00
Unemployment Compensation	\$3,520	100.00%	3520	0.00%		0.00%		0.00%	\$0.00
Workers Comp	\$11,811	100.00%	11811	0.00%		0.00%		0.00%	\$0.00
Debra Smith - HS Coordinator	73131.55	100.00%	73131.55	4.09%	2990.77	1.37%	1,000	5.46%	\$3,990.77
Barbara Liedtke - HS Coordinator	81554.30	100.00%	81554.30	2.94%	2,400	1.23%	1,000	4.17%	\$3,400.00
Lorraine Hernandez - HS Coordir	60168.58	100.00%	60168.58	3.99%	2,400	4.15%	2,500	8.14%	\$4,900.00
Bessie Rivera - HS Program Assi	57516.58	100.00%	57516.58	2.09%	1,200	1.74%	1,000	3.82%	\$2,200.00
Sue Kallstrom - Office Manager/F	67933.63	100.00%	67933.63	1.77%	1200	1.64%	1115.38	3.41%	\$2,315.38
Monterrat Zamora Olivares - HRF	68551.81	100.00%	68551.81	2.33%	1,600	1.46%	1,000	3.79%	\$2,600.00
Shirley Suprpto - SSP Case Ma	89319.36	100.00%	89319.36	1.79%	1,600	1.12%	1,000	2.91%	\$2,600.00
Vitani Taamu - SSP Case Manag	69376.32	100.00%	69376.32	2.31%	1,600	1.44%	1,000	3.75%	\$2,600.00
Laura Moya - HS Program Manag	90000	100.00%	90000	2.67%	2,400	0.00%		2.67%	\$2,400.00
Taxes/Benefits	\$427,068	100.00%	427068	0.43%	1,840	0.00%	\$0	0.43%	\$1,840.00
Supplies Lines needed: 4									
Administrative Expenses	\$421,129	80.00%	\$336,903	0.00%		0.00%		0.00%	\$0.00
Operating and Maintenance	\$261,066	80.00%	\$208,853	0.00%		0.00%		0.00%	\$0.00
Service Expense	\$226,476	100.00%	\$226,476	0.00%		0.00%		0.00%	\$0.00
Fundraising Expenses	\$73,963	77.30%	\$57,171	0.00%		0.00%		0.00%	\$0.00
Materials Lines needed: 0									
Operations/Maintenance Lines needed:									
Agency Administration									\$0.00
Indirect Costs Rate									
Indirect Costs	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
TOTAL	\$3,874,828.1	96.05%	\$3,721,597.1	0.52%	\$19,230.77	0.26%	\$9,615.38	0.78%	\$28,846.15
Amount Funded 2025					\$20000		\$10000		
Number of Individual Beneficiaries					25.00		40.00		65.00
Cost per Individual					\$769.23		\$240.38		\$443.79
Number of Household Beneficiaries					20.00		35.00		55.00
Cost per Household					\$961.54		\$274.73		\$524.48

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are **current** before submitting Renewal Application

- ☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors [2024-25_Signer_Resolution_signed_9_24_24.pdf](#)
- ☒ 2. Proof of 501(c)3 / tax-exempt status [HIP_IRS_Determination_Letter_June_2006.pdf](#)
- ☒ 3. By-laws [HIP_Housing_Bylaws.pdf](#)
- ☒ 4. Articles of Incorporation [HIP_Housing_Articles_of_Incorporation.pdf](#)
- ☒ 5. Board roster, including: [2024-25_HIP_Board_Roster_and_meeting_dates_10.45.55_AM.docx](#)
 - Name, Company, Years on Board
 - Meeting dates for previous 12 months
 - Number of years allowed for each board term
- ☒ 6. Organizational chart for entire organization [HIP_Housing_org_chart_1.2025.pdf](#)
- ☒ 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA: [Human_Investment_Project_Inc_and_Subsiary_6-30-24_-_FINAL_Audit.pdf](#)
 - Management letters

- ☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit. [Award_Certification_2023-24.pdf](#)
- ☒ 9. The following are required: [FY 24-25 HIP_Agency_and Program Budget.pdf](#)
[FY 25-26 HIP_Agency_and Program Budget Estimate.pdf](#)
- Current (FY24-25) **Agency** Operating Budget
 - Proposed (FY25-26) **Agency** Operating Budget
 - Current (FY24-25) **Program** Operating Budget
 - Proposed (FY25-26) **Program** Operating Budget
- ☒ 10. Mission Statement [Mission_Statement.docx](#)
- ☒ 11. Non-discrimination policy [Non-Discrimination_Policy-2.docx](#)
- ☐ 12. Reasonable Accommodations Policy
- ☐ 13. Other -

(Your application will be saved)

Application Submitted by: Laura Fanucchi Date: 01/17/2025

Click above to return application to Draft status, and please enter a reason in the box below

Reviewed and accepted by City of South San Francisco:

Sign Here:

status

City of San Mateo ,No

South San Francisco ,No



Initially submitted: Jan 17, 2025 - 13:02:44

Legal Aid Society



City:

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Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

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Renewal Application for FY 2025-26

City of San Mateo	South San Francisco
Status:	Status: Choose: <input type="text"/>

Comments:

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.

GENERAL INFORMATION

1. Project Title:

2. Project Address: City: Zip:

3. Provide a one sentence project summary:

Legal assistance to people threatened with losing their homes or living in substandard conditions with the goals of keeping people in their homes; preventing homelessness through the enforcement of legal rights, in and out of court; and remedying substandard living conditions through advocacy.

4. Organization Name:

Organization Address: City: Zip:

Organization Phone: Website:

Type of Applicant: Does your agency serve: ☒ Persons, or ☐ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:

Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:

Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:

Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: (Get a UEI #) Federal EIN/TIN Number:

Funding received from: ☐ Redwood City ☒ City of San Mateo ☐ County of San Mateo ☒ South San Francisco

10. Project Specific Narrative: Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

Program Objective: Legal Aid SMC keeps low-income tenants in their affordable homes by defending them against illegal and unfair evictions through in-court representation and assistance and out-of-court advocacy. We provide legal representation, advocacy, advice and other services to approximately 40 households per year in the City of San Mateo and 25 households per year in South San Francisco and answer dozens of tenant questions through phone consultations each week. Services are provided in person in our Redwood City office, and in weekly housing clinics in the community. We also provide services remotely for those with mobility or transportation issues.

Key Priorities: Legal Aid SMC strives to provide low-income clients with legal representation, advocacy, or the knowledge and practical assistance they need to more effectively advocate for themselves and their families with the goal of preserving their affordable housing and preventing them from becoming homeless or being displaced from their community.

11. Program Changes: Please detail any changes to your program for FY2025.

Due to sunseting funding streams and a shift in priorities from some of our funders, Legal Aid SMC's Housing Team has lost funding to provide legal services to low-income tenants in San Mateo County. We have made the difficult decision to not fill a vacant attorney position on this team until we are confident that we have the funding to support it. The HomeSavers program's objective, key priorities and specific activities remain unchanged; however, our capacity to serve tenants has been reduced. We will prioritize funded work. Given the extensive community need, we are confident that we can meet our proposed deliverables with the requested funding. Additional funding from a jurisdiction would provide

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q1)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	0	0			0	0		
City of San Mateo	218	92	129	52	0	0	113	45
County of San Mateo	63	48			0	0		
South San Francisco	184	81	118	47	0	0	100	40
Totals	465.00	221.00	247.00	99.00	0.00	0.00	213.00	85.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request. However, please take into consideration that this amount is most likely to stay the same or decrease

				City of San Mateo		South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	%	Requested	Pgm%	Requested
Labor Lines needed: <input type="text" value="6"/>									
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>									
Directing Attorney D.C.	136635	100.00%	136635	2.20%	3000	1.63%	2225	3.82%	\$5,225.00
Staff Attorney S.S.	105764	100.00%	105764	2.36%	2500	1.89%	\$2,000	4.25%	\$4,500.00
Staff Attorney M.P.	86929	100.00%	86929	2.67%	2325	2.30%	2000	4.98%	\$4,325.00
Project Coordinator N.H	65105	100.00%	65105	3.07%	2000	0.00%	0	3.07%	\$2,000.00
Project Coordinator G.Z.	71402	100.00%	71402	0.00%	\$0	2.80%	2000	2.80%	\$2,000.00
Other Staff	2746286	6.32%	173592	0.00%	0	0.00%	0	0.00%	\$0.00
Taxes/Benefits	796606	19.91%	158578	1.54%	2436	1.28%	\$2,035.87	2.82%	\$4,471.87
Supplies Lines needed: <input type="text" value="2"/>									
Operating Expenses	634620	13.57%	86135	0.00%	\$0.00	0.00%	\$0.00	0.00%	\$0.00
Subcontracts	130000	0.00%							\$0.00
Materials Lines needed: <input type="text" value="0"/>									
Operations/Maintenance Lines needed: <input type="text"/>									
Agency Administration <input type="text" value="2"/>					0				\$0.00
Indirect Costs Rate			15%		14.99875%		15.00%		
Indirect Costs	\$0.00		\$132,621.00		\$1,839.00		\$1,539.13		\$3,378.13
TOTAL	\$4,773,347.0	21.30%	\$1,016,761.0	1.39%	\$14,100.00	1.16%	\$11,800.00	2.55%	\$25,900.00
Amount Funded 2025					\$14100		\$11800		
Number of Individual Beneficiaries					113		100		213.00
Cost per Individual					\$124.78		\$118.00		\$121.60
Number of Household Beneficiaries					45		40		85.00
Cost per Household					\$313.33		\$295.00		\$304.71

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

This request includes attorney and bilingual project coordinator staff time and benefits as well as indirect costs. The taxes/benefits line is charged at a rate of 24.8% of salaries and includes fringe benefits and payroll taxes paid on behalf of employees such as retirement, FICA, health and life insurance, workers' compensation, unemployment insurance, and other payroll-related costs. Legal Aid SMC will charge the HUD-accepted 15% de minimis indirect cost rate to these contracts.

Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are **current** before submitting Renewal Application

- ☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors
[Legal Aid SMC 2025 Funding Resolution.pdf](#)
- ☒ 2. Proof of 501(c)3 / tax-exempt status
[LASSMC IRS 501c3 Letter 2003.PDF](#)
- ☒ 3. By-laws
[Legal Aid Society of San Mateo - Bylaws November 2022 as adopted.pdf](#)
- ☒ 4. Articles of Incorporation
[LASSMC Articles of Incorporation.pdf](#)
- ☒ 5. Board roster, including:

Name, Company, Years on Board

Meeting dates for previous 12 months

Number of years allowed for each board term

[LegalAidSMC Board List January 2025 CDS version.pdf](#)
- ☒ 6. Organizational chart for entire organization
[OrgChart November 2024.pdf](#)
- ☒ 7. Certified financial audit no more than 1 fiscal year old, prepared by a CPA:

Management letters

[Legal Aid SMC FY24 Audit Report.pdf](#)
- ☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit.
[Legal Aid SMC FY24 Single Audit Report.pdf](#)
- ☒ 9. The following are required:

Current (FY24-25) **Agency** Operating Budget

Proposed (FY25-26) **Agency** Operating Budget

Current (FY24-25) **Program** Operating Budget

Proposed (FY25-26) **Program** Operating Budget

[LASSMC Budget FY2025 for Grants.pdf](#)
[Projected LASSMC Budget FY2026 for Grants - Copy.pdf](#)
- ☒ 10. Mission Statement
[LASSMC Mission and Vision Statements.pdf](#)
- ☒ 11. Non-discrimination policy
[LASSMC Equal Employment Opportunity and Reasonable Accommodations Policy](#)
- ☒ 12. Reasonable Accommodations Policy
[LASSMC Equal Employment Opportunity and Reasonable Accommodations Policy](#)
- ☐ 13. Other -

(Your application will be saved)

Application Submitted by: Lauren Gee Date: 01/21/2025

Click above to return application to Draft status, and please enter a reason in the box below

Reviewed and accepted by City of South San Francisco:

Sign Here: Approval status
City of San Mateo ,No
South San Francisco ,No



Initially submitted: Jan 21, 2025 - 13:56:50

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Life Moves



City:

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Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

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Renewal Application for FY 2025-26

Status:

Comments:

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.

GENERAL INFORMATION

1. Project Title:
2. Project Address: City: Zip:

3. Provide a one sentence project summary:

LifeMoves is requesting funding to support interim housing programs and comprehensive supportive services at Family Crossroads for families and individuals experiencing homelessness from across San Mateo County.

4. Organization Name:
Organization Address: City: Zip:
Organization Phone: Website:

Type of Applicant: Does your agency serve: ☐ Persons, or ☐ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:
Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:
Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:
Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: ([Get a UEI #](#)) Federal EIN/TIN Number:

Funding received from:

☐ Redwood City ☐ City of San Mateo ☐ County of San Mateo ☒ South San Francisco

10. Project Specific Narrative: Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

LifeMoves' mission is to provide emergency interim housing and supportive services that create opportunities for families and individuals experiencing homelessness to return to stable housing and long-term self-sufficiency. At all six LifeMoves San Mateo County sites, LifeMoves staff work with clients to develop the skills they need to transform their lives and build lasting solutions to homelessness. All clients work with case managers to create and execute concrete plans to secure jobs, find childcare, locate housing, and other components needed to create a sustainable lifestyle and prevent future homelessness. In addition to meeting with their case manager to develop and implement individualized case plans, clients attend life skills workshops and adhere to key practices (e.g. a savings program) to help them regain self-sufficiency. Workshop curricula include effective search strategies for employment and housing, financial literacy training, and parenting skills. Additional onsite services include behavioral health, health care referrals, and substance abuse treatment support.

11. Program Changes: Please detail any changes to your program for FY2025.

There are no changes to our program for FY2025.

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q1)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	0	0			0	0		
City of San Mateo	0	0			0	0		
County of San Mateo	0	0			0	0		

South San Francisco	0	0	58		0	0	6.00	2.00
Totals	0.00	0.00	58.00	0.00	0.00	0.00	6.00	2.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request. However, please take into consideration that this amount is most likely to stay the same or decrease

				South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	Pgm%	Requested
Labor Lines needed: 5							
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>							
Program Directors	\$2,283,956.0	1.84%	\$42,013	0.00%		0.00%	\$0.00
Case Managers	\$7,001,561.0	0.89%	\$62,525	14.55%	\$9,096.00	14.55%	\$9,096.00
Children's Service Coordinators	\$860,635.00	6.64%	\$57,169	0.00%		0.00%	\$0.00
Other Labor	\$8,266,429.0	0.04%	\$3,668.79	219.09%	\$8,038.00	219.09%	\$8,038.00
Residential Services Coordinator	\$6,740,935.0	2.18%	\$146,747	3.41%	\$5,000.00	3.41%	\$5,000.00
Taxes/Benefits	\$10,187,174	1.26%	\$127,970.34	0.00%	\$0.00	0.00%	\$0.00
Supplies Lines needed: 2							
Client Assistance	\$10,252,723	0.03%	\$2,700.00	0.00%		0.00%	\$0.00
Other Direct Costs	\$11,846,713	1.22%	\$144,875.00	0.00%		0.00%	\$0.00
Materials Lines needed: 1							
							\$0.00
Operations/Maintenance Lines needed:							
Agency Administration	\$13,543,392	0.80%	\$108,804.00	3.78%	\$4,116.00	3.78%	\$4,116.00
Indirect Costs Rate							
Indirect Costs	\$0.00		\$0.00		\$0.00		\$0.00
TOTAL	\$70,983,518	0.98%	\$696,472.13	3.77%	\$26,250.00	3.77%	\$26,250.00
Amount Funded 2025					\$26250		
Number of Individual Beneficiaries					6.00		6.00
Cost per Individual					\$4,375.00		\$4,375.00
Number of Household Beneficiaries					2.00		2.00
Cost per Household					\$13,125.00		\$13,125.00

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

With over 35 years of experience, LifeMoves is a financially strong organization with sound leadership, strong Board governance, and fundraising and financial oversight. LifeMoves has a historically strong, well-balanced public and private funding base with an annual budget of ~\$70M for fiscal year 2024-25. In addition to grants from corporations and private foundations, as well as contracts from public sources, LifeMoves employs a broad spectrum of private fundraising and stewardship techniques combined with a strategic marketing campaign to achieve our annual fundraising goals. LifeMoves respectfully requests \$26,250 from South San Francisco to continue operations at Family Crossroads.

Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

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- | | | |
|-------------------------------------|---|---|
| <input checked="" type="checkbox"/> | 1. Resolution authorizing application and designation of signatory, by the Board of Directors | 1 -LifeMoves - BOD Authorizing Res 022019.pdf |
| <input checked="" type="checkbox"/> | 2. Proof of 501(c)3 / tax-exempt status | 2 -LifeMoves - 501c3.pdf |
| <input checked="" type="checkbox"/> | 3. By-laws | 3 -LifeMoves - ByLaws amended 041316.pdf |
| <input checked="" type="checkbox"/> | 4. Articles of Incorporation | 4 -LifeMoves - Articles of Incorporation.pdf |
| <input checked="" type="checkbox"/> | 5. Board roster, including: <ul style="list-style-type: none"> Name, Company, Years on Board Meeting dates for previous 12 months Number of years allowed for each board term | 5a - LifeMoves BoD Roster 2024-25.pdf
5b. 2025_BOD_EC_Calendar.pdf |
| <input checked="" type="checkbox"/> | 6. Organizational chart for entire organization | 6 - LifeMoves Org Chart 221020_no_titles.pdf |
| <input checked="" type="checkbox"/> | 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA: <ul style="list-style-type: none"> Management letters | 7 - LifeMoves FY24 Single Audit.pdf |
| <input checked="" type="checkbox"/> | 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit. | 8 - LifeMoves FY24 Single Audit.pdf |
| <input checked="" type="checkbox"/> | 9. The following are required: <ul style="list-style-type: none"> Current (FY24-25) Agency Operating Budget Proposed (FY25-26) Agency Operating Budget Current (FY24-25) Program Operating Budget Proposed (FY25-26) Program Operating Budget | 9a. LifeMoves Current FY25 Budget.pdf
9b - LifeMoves FY26 Budget Not Available.pdf
Shelter_Ops_Family_Crossroads_Program_Budget.ods |
| <input checked="" type="checkbox"/> | 10. Mission Statement | 10 - LifeMoves Vision Mission Strategy Value Statements.pdf |

- ☒ 11. Non-discrimination policy
- ☐ 12. Reasonable Accommodations Policy
- ☐ 13. Other -

[11-Non-Discrimination -
_EEO_policy_Clients_and_Staff.pdf](#)
[12-Conflicts_of_Interest.pdf](#)

(Your application will be saved)

Application Submitted by: Coiel Ricks-Stephen Date: 01/21/2025

Click above to return application to
Draft status, and please enter
a reason in the box below

Reviewed and accepted by City of South San Francisco:

Sign Here:

Approval

status

South San Francisco ,**No**



Initially submitted: Jan 21, 2025 - 12:34:47

Magic Tooth Bus



City:

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Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

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Renewal Application for FY 2025-26

Status:

Comments:

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.

GENERAL INFORMATION

1. Project Title:
2. Project Address: City: Zip:

3. Provide a one sentence project summary:

To provide dental screenings which are fundamental components of preventive oral healthcare. They involve comprehensive assessments by trained dental professionals to evaluate the condition of teeth and gums.

4. Organization Name:
Organization Address: City: Zip:
Organization Phone: Website:

Type of Applicant: Does your agency serve: ☒ Persons, or ☐ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:
Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:
Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:
Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: ([Get a UEI #](#)) Federal EIN/TIN Number:

Funding received from:

☐ Redwood City ☐ City of San Mateo ☐ County of San Mateo ☒ South San Francisco

10. Project Specific Narrative: Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

The mission of Magic Tooth Bus (MTB), a 501(c)3 nonprofit founded in 2017, is to provide accessible dental care and education to low income communities in the Bay Area. We envision a world free of dental disease. Our values are centered on equity, accessibility, and community.

Magic Tooth Bus's ongoing project with Breezeway Hub and community partners aims to increase dental access and improve the oral health of underserved neighborhoods. The project we are proposing is Dental Access to High Risk Cavity in South San Francisco (SSF) and Redwood City.

1. Magic Tooth Bus will partner with SSF and Redwood Promotores and community based organization leaders to help provide dental services (screening and fluoride application)

11. Program Changes: Please detail any changes to your program for FY2025.

Magic Tooth Bus will provide dental screenings and oral health awareness through educational materials, helping people to navigate dental home and motivate the population we serve at Breezeway Hub and FY 2025 we will expand our participation at the SSF Farmers Market and other SSF community events.

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	0	0			0	0		
City of San Mateo	0	0			0	0		
County of San Mateo	0	0			0	0		

South San Francisco	0	0		60.00	0	0	350.00	120.00
Totals	0.00	0.00	0.00	60.00	0.00	0.00	350.00	120.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request. However, please take into consideration that this amount is most likely to stay the same or decrease

				South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	Pgm%	Requested
Labor Lines needed: 4							
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>							
Dental Provider	\$67,800.00	13.57%	\$9,200.00	32.61%	\$3,000.00	32.61%	\$3,000.00
Dental Assistant	\$104,000.00	14.77%	\$15,360.00	19.53%	\$3,000.00	19.53%	\$3,000.00
Admin	\$104,000.00	19.38%	\$20,160.00	14.88%	\$3,000.00	14.88%	\$3,000.00
Operations / Professional Service	\$48,000.00	25.00%	\$12,000.00	41.67%	\$5,000.00	41.67%	\$5,000.00
Taxes/Benefits	\$10,550	17.06%	\$1,800	0.00%	\$0	0.00%	\$0.00
Supplies Lines needed: 2							
Dental Supplies	\$25,000.00	32.00%	\$8,000.00	0.00%		0.00%	\$0.00
Learning Supplies	\$3,500.00	4.29%	\$150.00	0.00%		0.00%	\$0.00
Materials Lines needed: 0							
Operations/Maintenance Lines needed: 2							
Dental Truck Maintenance and Fu	\$13,500.00	18.52%	\$2,500.00	0.00%		0.00%	\$0.00
Dental Software	\$5,424.00	33.19%	\$1,800.00	0.00%		0.00%	\$0.00
Agency Administration							\$0.00
Indirect Costs Rate	15.00%		5.00%				
Indirect Costs	\$57,266.10		\$3,548.50		\$0.00		\$0.00
TOTAL	\$439,040.10	16.97%	\$74,518.50	18.79%	\$14,000.00	18.79%	\$14,000.00
Amount Funded 2025					\$14000		
Number of Individual Beneficiaries					350.00		350.00
Cost per Individual					\$40.00		\$40.00
Number of Household Beneficiaries					120.00		120.00
Cost per Household					\$116.67		\$116.67

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

In order to achieve a successful program, we would require a team of qualified individuals and professionals. We would need
 (1) licensed dental providers such as a licensed dentist (DDS or DMD) and/or hygienist (RDH or RDHAP) to conduct the dental screenings;
 (2) licensed dental assistant to assist the dentist in recording the findings and turning over the chairs for the next patient;
 (3) admin to manage the schedule, coordinate treatment and referrals for next steps, and collect the income verification and documents from the patients;

Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are current before submitting Renewal Application

- ☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors [MTB Board Resolution.pdf](#)
- ☒ 2. Proof of 501(c)3 / tax-exempt status [IRS 501c3 1.pdf](#)
- ☒ 3. By-laws [Magic Tooth Bus - Bylaws.docx.pdf](#)
- ☒ 4. Articles of Incorporation [MTB Articles of Incorporation.jpg](#)
- ☒ 5. Board roster, including: [Board of Directors and Board Members 1 1 1.pdf](#)
 - Name, Company, Years on Board
 - Meeting dates for previous 12 months
 - Number of years allowed for each board term
- ☒ 6. Organizational chart for entire organization [MTB Organizational Chart.png](#)
- ☒ 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA: [Magic Tooth Bus Profit and Loss 2025-01-03-09 59.pdf](#)
 - Management letters
- ☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit. [MTB CEO PROOF OF FUNDING 1.pdf](#)
- ☒ 9. The following are required: [FY24-25 MTB Agency-wide Budget 1.pdf](#)
[FY25-26 MTB Agency-wide Budget 1.pdf](#)
 - Current (FY24-25) **Agency** Operating Budget
 - Proposed (FY25-26) **Agency** Operating Budget
 - Current (FY24-25) **Program** Operating Budget
 - Proposed (FY25-26) **Program** Operating Budget
- ☒ 10. Mission Statement [MTB Employee Handbook.docx](#)

- ☒ 11. Non-discrimination policy
- ☐ 12. Reasonable Accommodations Policy
- ☐ 13. Other -

[MTB_Employee_Handbook.docx](#)

[MTB_Employee_Handbook.docx](#)

(Your application will be saved)

Application Submitted by: Mylene Deano Date: 01/21/2025

Save As Draft

Click above to return application to Draft status, and please enter a reason in the box below

Reviewed and accepted by City of South San Francisco:

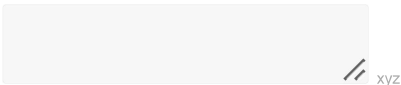
Sign Here:

Certify Application as Complete

Approval

status
South San Francisco ,No

Reset



Initially submitted: Jan 21, 2025 - 14:04:46

Rape Trauma Services Center



City:

[Help with this page](#)

Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

[Return to Main Page](#)

Renewal Application for FY 2025-26

<input type="text" value="Redwood City"/>	<input type="text" value="City of San Mateo"/>	<input type="text" value="South San Francisco"/>
Status:	Status:	Status: <input type="text" value="Choose:"/>

Comments:

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.

GENERAL INFORMATION

1. Project Title:

2. Project Address: City: Zip:

3. Provide a one sentence project summary:

The Sexual Abuse Services Program for Children and Youth provides mental health services to address the multiple healing needs of child survivors of sexual violence including: crisis intervention, individual and group counseling, advocacy, medical/legal and forensic accompaniment, and information and referrals.

4. Organization Name:

Organization Address: City: Zip:

Organization Phone: Website:

Type of Applicant: ☒ Non-Profit ☐ Does your agency serve: ☐ Persons, or ☐ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:

Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:

Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:

Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: (Get a UEI #) Federal EIN/TIN Number:

Funding received from:

☒ Redwood City ☒ City of San Mateo ☐ County of San Mateo ☒ South San Francisco

10. Project Specific Narrative: Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

RTS aims to help child abuse survivors learn the skills needed to heal from sexual abuse, decrease the likelihood of Post-Traumatic Stress Disorder, develop the tools to be supportive of their healing, and prevent continued or future abuse. RTS' program clearly matches many HUD activities by providing Basic Human Needs to Abused Children. RTS provides mental health services to child abuse survivors including Advocacy & Accompaniment, Crisis Intervention, Therapy, Information, Referrals, and Violence Prevention.

The Polaris Project, the human trafficking crisis line, has identified San Mateo County as a Human Trafficking Hotspot. Child Sexual Exploitation is a form of child abuse in itself, but the number one risk factor for being sexually exploited is having been a victim of childhood sexual abuse.

County-wide, in FY 2024 RTS provided 678 child abuse victims with crisis intervention, accompaniment, and advocacy during forensic medical exams & interviews. RTS provides

11. Program Changes: Please detail any changes to your program for FY2025.

Services continue as outlined above and are provided in-person, with the option of Tele-Health or virtual programming when requested. There are no significant program changes.

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q2)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	97	0	85		46	46	85	85
City of San Mateo	94	0	80		43	43	85	85
County of San Mateo	0	0			0	0	0	0

South San Francisco	99	0	85		45	45	85	85
Totals	290.00	0.00	250.00	0.00	134.00	134.00	255.00	255.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request, However, please take into consideration that this amount is most likely to stay the same or decrease

				Redwood City		City of San Mateo		South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	%	Requested	%	Requested	Pgm%	Requested
Labor Lines needed: <input type="text" value="8"/>											
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>											
Executive Director	\$165,000	38.18%	\$63,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Deputy Director/CSEC Coordina	\$130,000	50.77%	\$66,000	3.03%	\$2,000	3.03%	\$2,000	3.03%	\$2,000	9.09%	\$6,000.00
Bilingual Family Advocate	\$70,000	86.43%	\$60,500	0.00%	0	0.00%	\$0.00	0.00%	\$0	0.00%	\$0.00
Lead Advocate	\$75,000	66.67%	\$50,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Volunteer Coordinator/Trauma Ct	\$80,000	50.00%	\$40,000	5.00%	\$2,000	5.00%	\$2,000	5.00%	\$2,000	15.00%	\$6,000.00
Prevention Educators/Trauma Cc	\$150,000	40.00%	\$60,000	3.33%	\$2,000	3.33%	\$2,000	3.33%	\$2,000	10.00%	\$6,000.00
Advocates/Trauma Counselors (3	\$174,500	63.04%	\$110,000	5.46%	\$6006	4.64%	\$5,100.00	5.45%	\$6,000	15.55%	\$17,106.00
Trauma Therapists (2 staff memb	\$150,000	53.33%	\$80,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Taxes/Benefits	\$188,955	48.06%	\$90,820	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Supplies Lines needed: <input type="text" value="10"/>											
Occupancy Lease	\$132,000	39.39%	\$52,000	5.77%	\$3,000	5.77%	\$3,000	5.77%	\$3,000	17.31%	\$9,000.00
Telephone and Communication	\$29,500	40.68%	\$12,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Local Travel / Mileage	\$15,000	36.67%	\$5,500	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Office Supplies	\$7,500	46.67%	\$3,500	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Equipment and Maintenance	\$5,000	40.00%	\$2,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Postage and Delivery	\$7,500	40.00%	\$3,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Printing and Reproduction	\$7,000	57.14%	\$4,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
General Liability Insurance	\$3,200	37.50%	\$1,200	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Trainings and Workshops	\$2,000	50.00%	\$1,000	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Membership Dues	\$1,625	30.77%	\$500	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Materials Lines needed: <input type="text" value="0"/>											
Operations/Maintenance Lines needed: <input type="text"/>											
Agency Administration ?											\$0.00
Indirect Costs Rate											
Indirect Costs	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
TOTAL	\$1,393,780.00	50.58%	\$705,020.00	2.13%	\$15,006.00	2.00%	\$14,100.00	2.13%	\$15,000.00	6.26%	\$44,106.00
Amount Funded 2025					\$15006		\$14100		\$15000		
Number of Individual Beneficiaries					85		85		85		255.00
Cost per Individual					\$176.54		\$165.88		\$176.47		\$172.96
Number of Household Beneficiaries					85		85		85		255.00
Cost per Household					\$176.54		\$165.88		\$176.47		\$172.96

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

Funds are used for staff costs when providing direct services to children in specific jurisdiction (RWC, SM, SSF).
Occupancy: Office space for planning and implementing grant objectives and connected tasks. All rooms have dual uses as business & counseling offices, geared to comfort children, youth and families. No monies are used for renting other facilities than our main office where in-person therapy and crisis intervention services are provided to children from specific jurisdictions (RWC, SM, SSF).

Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are **current** before submitting Renewal Application

- ☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors [RTS_City_Board_Resolution_2025.pdf](#)
- ☒ 2. Proof of 501(c)3 / tax-exempt status [Rape_Trauma_Services_IRS_Tax_Exempt_Letter_2.pdf](#)
- ☒ 3. By-laws [RTS_BYLAWS.pdf](#)
- ☒ 4. Articles of Incorporation [RTS_articles_of_incorporation.pdf](#)
- ☒ 5. Board roster, including: [RTS_BOARD_LIST_2023_2026.doc](#)
 - Name, Company, Years on Board
 - Meeting dates for previous 12 months
 - Number of years allowed for each board term
- ☒ 6. Organizational chart for entire organization [General_Org_Chart.pdf](#)
- ☒ 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA: [AUDIT_20230630-Rape_Trauma_Services.pdf](#)
 - Management letters

☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit, [AUDIT_20230630-Rape_Trauma_Services.pdf](#)

☒ 9. The following are required:

- Current (FY24-25) **Agency** Operating Budget
- Proposed (FY25-26) **Agency** Operating Budget
- Current (FY24-25) **Program** Operating Budget
- Proposed (FY25-26) **Program** Operating Budget

[Agency_Budget_2024_2025.pdf](#)
[Proposed_Agency_Budget_2025_26.pdf](#)
[Children_and_Youth_program_budget_24_25.pdf](#)
[Children_and_Youth_proposed_program_budget_25_2026.pdf](#)

☒ 10. Mission Statement

[RTS_Mission_Statement_1.pdf](#)

☒ 11. Non-discrimination policy

[RTS_Non_Discrimination_Policy_3.pdf](#)

☒ 12. Reasonable Accommodations Policy

[RTS_Reasonable_Accommodations_Policy_2.pdf](#)

☐ 13. Other -

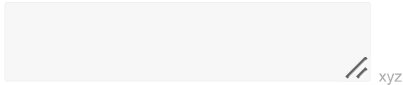
(Your application will be saved)

Application Submitted by: Emily Abrams Date: 01/20/2025

Reviewed and accepted by City of South San Francisco:

Sign Here: Certify Application as Complete Approval
status
Redwood City ,No
City of San Mateo ,No
South San Francisco ,No

Click above to return application to Draft status, and please enter a reason in the box below



Initially submitted: Jan 20, 2025 - 20:01:41

Renaissance Entrepreneurship Center

City: [Help with this page](#)

Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

[Return to Main Page](#)**Renewal Application for FY 2025-26**

<input type="text" value="Redwood City"/>	<input type="text" value="City of San Mateo"/>	<input type="text" value="County of San Mateo"/>	<input type="text" value="South San Francisco"/>
Status:	Status:	Status:	Status: Choose: <input type="text" value="v"/>

Comments:

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.**GENERAL INFORMATION**

1. Project Title:
2. Project Address: City: Zip:

3. Provide a one sentence project summary:

Igniting the power of entrepreneurship to strengthen lower-income English and Spanish-speaking communities, families and individuals in San Mateo County.

4. Organization Name:
Organization Address: City: Zip:
Organization Phone: Website:

Type of Applicant: Does your agency serve: ☐ Persons, or ☐ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:
Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:
Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:
Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: ([Get a UEI #](#)) Federal EIN/TIN Number: **Funding received from:**☒ Redwood City ☒ City of San Mateo ☒ County of San Mateo ☒ South San Francisco

10. Project Specific Narrative: Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

With support from the City of Redwood City, City of San Mateo, City of South San Francisco and County of San Mateo, Renaissance Peninsula will support 260 low-income English- and Spanish-speaking women and men: 60 in Redwood City; 50 in the City of San Mateo; 30 in the City of South San Francisco; and 120 in the County of San Mateo, with customized small business training, one-on-one consulting, and access to capital, resources, entrepreneur marketplaces, and networks to assist them in starting and growing their sustainable small businesses.

11. Program Changes: Please detail any changes to your program for FY2025.

No program changes for 2025-26

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q2)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	0	0	60	60	29	29	60	60
City of San Mateo	0	0	50	50	11	11	50	50
County of San Mateo	0	0	120	150	79	67	120	120

South San Francisco	0	0	30	40	18	18	30	30
Totals	0.00	0.00	260.00	300.00	137.00	125.00	260.00	260.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request, However, please take into consideration that this amount is most likely to stay the same or decrease

				Redwood City		City of San Mateo		County of San Mateo		South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	%	Requested	%	Requested	%	Requested	Pgm%	Requested
Labor Lines needed: 7													
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>													
Regional Director	\$130,000.00	6.92%	9000.00	27.78%	2500	27.78%	2500	27.78%	\$2,500	16.67%	1500	100.00%	\$9,000.00
San Mateo County Director	\$128,000.00	19.45%	24900.00	39.36%	9800	14.46%	3600	31.73%	7900	14.46%	3600	100.00%	\$24,900.00
Finance Director	\$132,000.00	1.67%	2200.00	27.27%	600	27.27%	600	27.27%	600	18.18%	400	100.00%	\$2,200.00
Program Manager	\$94,000.00	21.81%	20500.00	29.27%	6000	26.83%	5500	26.83%	5500	17.07%	3500	100.00%	\$20,500.00
Program Coordinator	\$79,750.00	16.93%	13500.00	29.63%	4000	29.63%	4000	29.63%	4000	11.11%	1500	100.00%	\$13,500.00
Program Assistant	\$54,357.00	19.32%	10500.00	28.57%	3000	33.33%	3500	28.57%	3000	9.52%	1000	100.00%	\$10,500.00
Data & Evaluation	\$100,000.00	4.70%	4700.00	31.91%	\$1,500	25.53%	\$1,200.00	31.91%	\$1,500	10.64%	500	100.00%	\$4,700.00
Taxes/Benefits	\$129,259.26	11.88%	15354.00	33.91%	5206	25.86%	3971	30.94%	4750	14.85%	2280	105.56%	\$16,207.00
Supplies Lines needed: 1													
Consultants/Instructors	\$600,000.00	6.41%	38476.43	28.26%	10872.26	25.76%	9911.61	24.38%	9380.44	19.39%	7459.13	97.78%	\$37,623.44
Materials Lines needed: 0													
Operations/Maintenance Lines needed:													
Agency Administration	217105	9.61%	20869.57	31.25%	6521.74	25.00%	5217.39	28.12%	5869.56	15.62%	3260.87	100.00%	\$20,869.56
Indirect Costs Rate													
Indirect Costs	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
TOTAL	\$1,664,471.2	9.61%	\$160,000.00	31.25%	\$50,000.00	25.00%	\$40,000.00	28.13%	\$45,000.00	15.63%	\$25,000.00	100.00%	\$160,000.00
Amount Funded 2025					\$50000		\$40000		\$45000		\$25000		
Number of Individual Beneficiaries					60		50		120		30		260.00
Cost per Individual					\$833.33		\$800.00		\$375.00		\$833.33		\$615.38
Number of Household Beneficiaries					60		50		120		30		260.00
Cost per Household					\$833.33		\$800.00		\$375.00		\$833.33		\$615.38

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

The program will deliver customized small business training, one-on-one consulting, and access to capital, resources, markets, and networks to assist lower-income and under-resourced residents in San Mateo County in starting and growing sustainable small businesses.. All services will be delivered in English and Spanish. The costs associated with the program include:

Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are **current** before submitting Renewal Application

- ☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors [CDBG Resolution of the Board of Directors - San Mateo County.pdf](#)
- ☒ 2. Proof of 501(c)3 / tax-exempt status [2. IRS 501 c3.pdf](#)
- ☒ 3. By-laws [3. Renaissance Board Bylaws.pdf](#)
- ☒ 4. Articles of Incorporation [4. Articles of Incorporation.pdf](#)
- ☒ 5. Board roster, including: [Board of Directors Roster with Terms January 2025.pdf](#)
 - Name, Company, Years on Board
 - Meeting dates for previous 12 months
 - Number of years allowed for each board term
- ☒ 6. Organizational chart for entire organization [Renaissance Organizational Chart H. Dec 2024.pdf](#)
- ☒ 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA: [Renaissance-Audited-Financial-Statements-2023_1.pdf](#)
 - Management letters
- ☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit. [Renaissance-Audited-Financial-Statements-2023_1.pdf](#)
- ☒ 9. The following are required: [9. Mission Statement.pdf](#)
 - Current (FY24-25) **Agency** Operating Budget
 - Proposed (FY25-26) **Agency** Operating Budget
 - Current (FY24-25) **Program** Operating Budget
 - Proposed (FY25-26) **Program** Operating Budget
- ☒ 10. Mission Statement [10. Non-Discrimination Policy.pdf](#)

- ☒ 11. Non-discrimination policy
- ☒ 12. Reasonable Accommodations Policy
- ☐ 13. Other -

[11. Reasonable Accommodations Policy.pdf](#)

[12. Renaissance Conflict of Interest Policy.pdf](#)

(Your application will be saved)

Application Submitted by: Tim Russell Date: 01/21/2025

Reviewed and accepted by City of South San Francisco:
Sign Here:

Certify Application as Complete

Approval

status

Redwood City ,No

City of San Mateo ,No

County of San Mateo ,No

South San Francisco ,No

Reset

Save As Draft

Click above to return application to Draft status, and please enter a reason in the box below

xyz

Initially submitted: Jan 21, 2025 - 09:20:02

Samaritan House



City:

[Help with this page](#)

Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdhg@ssf.net

[Return to Main Page](#)

Renewal Application for FY 2025-26

<input type="text" value="Redwood City"/>	<input type="text" value="South San Francisco"/>
Status: <input type="text"/>	Status: <input type="text" value="Choose"/>

Comments:

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.

GENERAL INFORMATION

1. Project Title:	<input type="text" value="Safe Harbor Shelter"/>		
2. Project Address:	<input type="text" value="295 North Access Road"/>	City: <input type="text" value="South San Francisco"/>	Zip: <input type="text" value="94080"/>

3. Provide a one sentence project summary:

Safe Harbor Shelter, a 105-bed adult, congregate homeless shelter located in South San Francisco, is an integral component of San Mateo County's housing crisis resolution system offering short-term, emergency housing with supportive services to swiftly transition clients into permanent housing..

4. Organization Name:	<input type="text" value="Samaritan House"/>		
Organization Address:	<input type="text" value="4031 Pacific Blvd."/>	City: <input type="text" value="San Mateo"/>	Zip: <input type="text" value="94403"/>
Organization Phone:	<input type="text" value="650-341-4081"/>	Website:	<input type="text" value="www.samaritanhousesanmateo.org"/>

Type of Applicant: Does your agency serve: ☐ Persons, or ☐ Households?

5. Contact Person / Project Administrator:	Name: <input type="text" value="Alec Raffin; Anjenette Mend"/>	Title: <input type="text" value="Chief Operating Officer; Dir"/>	Telephone: <input type="text" value="650-523-0824; 650.351.503"/>
Contact Email:	<input type="text" value="araffin@samaritanhousesanmateo.org"/>	Fax: <input type="text"/>	

6. Name of Agency Director:	<input type="text" value="Laura Bent"/>
-----------------------------	---

7. Fiscal Officer:	Name: <input type="text" value="Jolie Bou"/>	Email: <input type="text" value="jbou@samaritanhousesanmateo.org"/>	Telephone: <input type="text" value="650-523-0810"/>
Fiscal Officer Address:	<input type="text" value="4031 Pacific Blvd."/>	City: <input type="text" value="San Mateo"/>	Zip: <input type="text" value="94403-466"/>

8. Authorized Signatory:	Name: <input type="text" value="Laura Bent"/>	Email: <input type="text" value="laura@samaritanhousesanmateo.org"/>	Telephone: <input type="text" value="650-523-0812"/>
Authorized Signatory Address:	<input type="text" value="4031 Pacific Blvd."/>	City: <input type="text" value="San Mateo"/>	Zip: <input type="text" value="94403-466"/>

9. SAM/UEI Number:	<input type="text" value="88-448-6341"/> (Get a UEI #)	Federal EIN/TIN Number:	<input type="text" value="23-7416272"/>
--------------------	--	-------------------------	---

Funding received from:

☒ Redwood City ☐ City of San Mateo ☐ County of San Mateo ☒ South San Francisco

10. Project Specific Narrative: Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

Safe Harbor Shelter, a 105-bed adult, congregate homeless shelter located in South San Francisco, is an integral component of San Mateo County's housing crisis resolution system offering short-term, emergency housing with supportive services to swiftly transition clients into permanent housing. Services encompass nutrition; intensive case management; housing location services; counseling; medical, dental, behavioral health care; educational programming; linkages to Federal, state, and local benefits; employment assistance/job training; legal services; life skills training; substance abuse treatment services; and supportive services. Safe Harbor will provide emergency housing and supportive services for 100 residents from the City of Redwood City and 90 residents from the City of South San Francisco.

Safe Harbor employs a Housing First model, creating personalized empowerment plans to address housing barriers. Through a tiered case management model, Safe Harbor staff (case managers, housing liaison, and intake) assess, coordinate, and monitor client-centered services for unhoused residents.

11. Program Changes: Please detail any changes to your program for FY2025.

There are no changes to this program for FY2025.

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q2)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	112	111	100	100.00	94	94	100.00	100.00
City of San Mateo	0	0			0	0		
County of San Mateo	0	0			0	0		

South San Francisco	97	97	90	90.00	84	84	90.00	90.00
Totals	209.00	208.00	190.00	190.00	178.00	178.00	190.00	190.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request. However, please take into consideration that this amount is most likely to stay the same or decrease

				Redwood City		South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	%	Requested	Pgm%	Requested
Labor Lines needed: <input type="text" value="2"/>									
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>									
Case Manager - EB	\$74,360.00	100.00%	\$74,360.00	20.18%	15005.57	24.21%	18000	44.39%	\$33,005.57
Other staff	\$13,253,149.00	10.45%	\$1,385,603.00	0.00%		0.00%		0.00%	\$0.00
Taxes/Benefits	\$3,173,296.00	9.81%	\$311,168.00	0.00%		0.00%		0.00%	\$0.00
Supplies Lines needed: <input type="text" value="9"/>									
Supplies	\$1,794,494.00	15.77%	\$282,930.00	0.00%		0.00%		0.00%	\$0.00
Occupancy	\$881,929.00	5.00%	\$44,076.00	0.00%		0.00%		0.00%	\$0.00
Utilities & Communications	\$864,499.00	3.66%	\$31,677.00	0.00%		0.00%		0.00%	\$0.00
Housekeeping	\$567,532.00	9.69%	\$55,000.00	0.00%		0.00%		0.00%	\$0.00
Outside Services & Prof Fees	\$3,297,655.00	2.67%	\$88,000.00	0.00%		0.00%		0.00%	\$0.00
Temp staffing	\$569,199.00	12.92%	\$73,514.00	0.00%		0.00%		0.00%	\$0.00
Client Financial Assistance	\$3,500,000.00	0.00%	\$0						\$0.00
Transport, fees & taxes	\$470,214.00	4.10%	\$19,270.00	0.00%		0.00%		0.00%	\$0.00
In-kind and other fees	\$11,714,037.00	4.23%	\$495,738.00	0.00%		0.00%		0.00%	\$0.00
Materials Lines needed: <input type="text" value="0"/>									
Operations/Maintenance Lines needed: <input type="text" value=""/>									
Agency Administration							1800		\$1,800.00
Indirect Costs Rate									
Indirect Costs	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
TOTAL	\$40,160,364.00	7.12%	\$2,861,336.00	0.52%	\$15,005.57	0.69%	\$19,800.00	1.22%	\$34,805.57
Amount Funded 2025					\$15006		\$19800		
Number of Individual Beneficiaries					100.00		90.00		190.00
Cost per Individual					\$150.06		\$220.00		\$183.19
Number of Household Beneficiaries					100.00		90.00		190.00
Cost per Household					\$150.06		\$220.00		\$183.19

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

Funds will be used to support a Shelter Case Manager who is charged with the development of an individualized housing and service plan or individualized empowerment plan focused on: (1) housing readiness measures, (2) housing stability measures, and (3) the development of ongoing housing-related goals that emphasize not only the acquisition of housing but ongoing housing stability. The case manager will also support clients by providing referrals to physical and mental health services, substance abuse treatment programs, employment assistance programs, housing agencies, educational programs, legal aid services and more.

Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are current before submitting Renewal Application

- ☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors [2025 Board Resolution CDBG LMIHAF.doc.pdf](#)
[2025 Board Resolution CDBG.doc.pdf](#)
[Samaritan House IRS 501c3 Determination Letter.pdf](#)
- ☒ 2. Proof of 501(c)3 / tax-exempt status [SH Bylaws approved amended 02252021.pdf](#)
- ☒ 3. By-laws [Original Articles of Incorporation 12.12.1974.pdf](#)
- ☒ 4. Articles of Incorporation [SH Board FY24-25 updated TermsCalendar Sept 2024.pdf](#)
- ☒ 5. Board roster, including:
 - Name, Company, Years on Board
 - Meeting dates for previous 12 months
 - Number of years allowed for each board term
- ☒ 6. Organizational chart for entire organization [Samaritan House Organization Chart 2024 July.pdf](#)
- ☒ 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA: [Samaritan House FY24 Audit Secured.pdf](#)
 - Management letters
- ☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit. [Samaritan House FY24 Single Audit.pdf](#)
- ☒ 9. The following are required:
 - Current (FY24-25) **Agency** Operating Budget [Samaritan House Total Agency FY25 Operating Budget.pdf](#)
 - Proposed (FY25-26) **Agency** Operating Budget [FY25 Safe Harbor Budget.pdf](#)
 - Current (FY24-25) **Program** Operating Budget [SamHouse projected FY26 budget Total Agency.pdf](#)
[Samaritan House FY26 Proposed Safe Harbor Budget-250116.pdf](#)

- Proposed (FY25-26) **Program** Operating Budget

- ☒ 10. Mission Statement
- ☒ 11. Non-discrimination policy
- ☒ 12. Reasonable Accommodations Policy
- ☐ 13. Other -

[Samaritan House Mission Statement 21.pdf](#)

[Samaritan House Non-Discrimination Policy 2021.pdf](#)

[Samaritan House Reasonable Accommodations Policy.pdf](#)

(Your application will be saved)

Application Submitted by: Michele Hentrich Harbin Date: 01/17/2025

Click above to return application to Draft status, and please enter a reason in the box below

Reviewed and accepted by City of South San Francisco:

Sign Here: Approval
status
Redwood City ,No
South San Francisco ,No



Initially submitted: Jan 17, 2025 - 16:22:48

Star Vista



City:

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Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

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Renewal Application for FY 2025-26

Status:

Comments:

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.

GENERAL INFORMATION

1. Project Title:
2. Project Address: City: Zip:

3. Provide a one sentence project summary:

StarVista's Transitional Housing Placement Plus (THP+) program provides subsidized apartments in South San Francisco and case management services for emancipated foster youth aged 18-25, in addition to essential life skills training and assistance finding employment or attending school.

4. Organization Name:
Organization Address: City: Zip:
Organization Phone: Website:

Type of Applicant: Does your agency serve: ☐ Persons, or ☐ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:
Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:
Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:
Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: ([Get a UEI #](#)) Federal EIN/TIN Number:

Funding received from:

☐ Redwood City ☐ City of San Mateo ☐ County of San Mateo ☒ South San Francisco

10. Project Specific Narrative: Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

StarVista's THP+ program houses and supports emancipated foster and juvenile justice youth aged 18-25 in a South San Francisco housing triplex. Serving approximately 8 youth per year, the program supports each youth to attain stable housing, optimal health, education, employment, and to develop caring, supportive relationships. In tandem with housing, THP+ youth build independent living skills and receive holistic, individualized supportive services rooted in evidence-based practices. Services begin by assessing each youth to inform the creation of a Transitional Independent Living Plan tailored to their unique needs. THP+ counselors provide basic life skills (e.g., budgeting, housekeeping, parenting skills, etc.), educational support, and help with job preparation and attainment. Staff also support youth to build interpersonal skills that foster positive relationships, decision making, stress management, and self-care. Youth must also engage in 30 productive hours (e.g., school, work, counseling, etc.) per week. To build financial self-sufficiency, youth receive a matched savings account upon completion, a stipend for groceries, and transportation vouchers. THP+ also provides aftercare services for youth that need ongoing support to remain housed.

11. Program Changes: Please detail any changes to your program for FY2025.

We are working closely with clients to increase their self-sufficiency skills, and this will continue into FY25-26. Our main goal is to support youth in creating and maintaining positive habits that they can take with them into their next living situation and beyond. This will include increase responsibilities (e.g., indoor and outdoor chores like mopping, taking out the trash, sweeping the back yard, properly storing food), formalizing consequences for incomplete chores, and growing the program's new move-in/move-out processes to mimic walk-throughs landlords will require when youth move into their own homes after exiting the program.

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program, For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q1)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	0	0			0.00	0	0.00	0.00
City of San Mateo	0	0			0.00	0	0.00	0.00
County of San Mateo	0	0			0.00	0	0.00	0.00

South San Francisco	0	0		10.00	0	0	8.00	8.00
Totals	0.00	0.00	0.00	10.00	0.00	0.00	8.00	8.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request. However, please take into consideration that this amount is most likely to stay the same or decrease

				South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	Pgm%	Requested
Labor Lines needed: <input type="text" value="1"/>							
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>							
Total Staff	\$9,300,000.00	2.35%	\$218,561.00	3.85%	\$8,417.39	3.85%	\$8,417.39
Taxes/Benefits	\$3,100,000.00	3.54%	\$109,755	1.92%	\$2,104.35	1.92%	\$2,104.35
Supplies Lines needed: <input type="text" value="1"/>							
Program Supplies	\$300,000.00	2.47%	\$7,400.00	0.00%	\$0.00	0.00%	\$0.00
Materials Lines needed: <input type="text" value="1"/>							
Office Supplies	\$100,000.00	0.30%	\$300.00	0.00%	\$0.00	0.00%	\$0.00
Operations/Maintenance Lines needed: <input type="text" value="7"/>							
Client Costs	\$1,000,000.00	69.10%	\$691,000.00	0.00%	\$0.00	0.00%	\$0.00
Employee Related Expenses	\$250,000.00	1.84%	\$4,600.00	0.00%	\$0.00	0.00%	\$0.00
Facilities & Equipment: Office Re	\$900,000.00	2.28%	\$20,500.00	0.00%	\$0.00	0.00%	\$0.00
Telephone, Postage, Printing	\$100,000.00	6.00%	\$6,000.00	0.00%	\$0.00	0.00%	\$0.00
Professional Services & Fees	\$400,000.00	0.00%	\$0.00		\$0.00		\$0.00
Insurance	\$100,000.00	0.00%	\$0.00		\$0.00		\$0.00
Other/Miscellaneous	\$250,000.00	2.40%	\$6,000.00	0.00%	\$0.00	0.00%	\$0.00
Agency Administration ?	\$0.00		\$0.00		\$0.00		\$0.00
Indirect Costs Rate	15.00%		15.00%		15.00%		0.00%
Indirect Costs	\$2,370,000.00		\$159,617.40		\$1,578.26		\$1,578.26
TOTAL	\$18,170,000	6.73%	\$1,223,733.4	0.99%	\$12,100.00	0.99%	\$12,100.00
Amount Funded 2025					\$12100		
Number of Individual Beneficiaries					8.00		8.00
Cost per Individual					\$1,512.50		\$1,512.50
Number of Household Beneficiaries					8.00		8.00
Cost per Household					\$1,512.50		\$1,512.50

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

Grant funding will largely support direct program expenses and additionally support a small portion of administrative indirect expenses that provide vital support to our THP+ program's work on the back end. Direct program expenses to be funded by this grant are staff salaries for individuals key to the delivery of our THP+ services (e.g., the Program Manager, Site Coordinator, Case Managers, etc.). Indirect costs typically include salaries of administrative staff (i.e., Human Resources, Finance and Accounting, IT, Operations, etc.) that provide essential back-end support to keep Daybreak running smoothly; administrative program costs (e.g., IT software); financial fees (i.e., audit fees, license fees); and



Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are current before submitting Renewal Application

☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors

[Board_resolution_SSF_CDBG_TYS_FY25-26_1_-_signed_1.pdf](#)

☒ 2. Proof of 501(c)3 / tax-exempt status

[StarVista_501c3_Status_9.pdf](#)

☒ 3. By-laws

[FY15-Board-Bylaws-April-2-2015_2.pdf](#)

☒ 4. Articles of Incorporation

[Articles_of_Incorporation_StarVista.pdf](#)

☒ 5. Board roster, including:

[2024_Board_Roster_Terms_Meeting_Schedule.pdf](#)

- Name, Company, Years on Board
- Meeting dates for previous 12 months
- Number of years allowed for each board term

☒ 6. Organizational chart for entire organization

[SV_Org_Chart_FY24-25_ao_9.3.24_1.pdf](#)

☒ 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA:

[StarVista_23_FINAL_FS_3.pdf](#)

[StarVista_23_FINAL_CL_1.pdf](#)

- Management letters

☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit.

[City_of_SSF_Single_Site_Audit_Exemption_Letter_FY25-26.pdf](#)

- ☒ 9. The following are required:
- Current (FY24-25) **Agency** Operating Budget
 - Proposed (FY25-26) **Agency** Operating Budget
 - Current (FY24-25) **Program** Operating Budget
 - Proposed (FY25-26) **Program** Operating Budget

[FY25-26 StarVista Budget - DRAFT 1.pdf](#)
[FY24-25 Approved StarVista Budget.pdf](#)
[252 FY25-26 TYS Budget - Proposed.pdf](#)
[252 FY24-25 TYS Budget - Approved.pdf](#)

☒ 10. Mission Statement

[StarVista Mission and Values FY22-26.pdf](#)

☒ 11. Non-discrimination policy

[StarVista Non-Discrimination Policy 2.pdf](#)

☒ 12. Reasonable Accommodations Policy

[Conflict of Interest Policy 2019.pdf](#)

☐ 13. Other -

(Your application will be saved)

Application Submitted by: Lauren Heminez Date: 01/21/2025

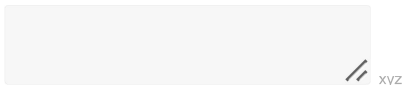
Click above to return application to Draft status, and please enter a reason in the box below

Reviewed and accepted by City of South San Francisco:

Sign Here:

status

South San Francisco ,No



Initially submitted: Jan 21, 2025 - 13:18:05

Rebuilding Together
Peninsula- National
Rebuilding Day



City:

[Help with this page](#)

Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

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Renewal Application for FY 2025-26

<input type="text" value="Redwood City"/>	<input type="text" value="City of San Mateo"/>	<input type="text" value="County of San Mateo"/>	<input type="text" value="South San Francisco"/>
Status:	Status:	Status:	Status: Choose: <input type="text"/>

Comments:

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.

GENERAL INFORMATION

1. Project Title:

2. Project Address: City: Zip:

3. Provide a one sentence project summary:

National Rebuilding Day (NRD) - Home Rehabilitation program is a volunteer-driven home repair program (held in October and April annually) that brings together 1,000 volunteers on behalf of dozens of low-income homeowners, ensuring that every neighbor we serve has one of the most critical of human needs met -- a safe and healthy home.

4. Organization Name:

Organization Address: City: Zip:

Organization Phone: Website:

Type of Applicant: Does your agency serve: ☐ Persons, or ☒ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:

Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:

Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:

Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: [\(Get a UEI #\)](#) Federal EIN/TIN Number:

Funding received from:

☒ Redwood City ☒ City of San Mateo ☒ County of San Mateo ☒ South San Francisco

10. Project Specific Narrative: Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

RTP's National Rebuilding Day (NRD) - Home Rehabilitation program leverages the collaborative support of volunteers, financial sponsors, and in-kind donations to deliver major critical repairs to low-income homeowners that lack the financial means and technical expertise to address the repair issues plaguing their health and safety.

Activities:

1. Homeowner completes application.
2. RTP reviews the application, verifies eligibility (e.g. location, property taxes paid, income, conflict of interest).
3. RTP previews the home to develop a scope of work, focusing on the principles of healthy housing.
4. For rehab projects, RTP conducts a Radon test.

11. Program Changes: Please detail any changes to your program for FY2025.

The operation of RTP's NRD home repair program has remained largely the same. However, there have been a series of processes that have been clarified or added as a result of a number of discussions between the jurisdictions and RTP from June to September 2024. These discussions resulted in the Minor Home Repair Guidelines (published by the San Mateo County Department of Housing on 9/2/2024). RTP has trained all of its staff on these guidelines and they are now the basis for our program's operations. The guidelines include additional guidance on:

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q2)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	0	2	0.00	3	0	0	0.00	3
City of San Mateo	0	5	0.00	5	0	0	0.00	6
County of San Mateo	0	8	0.00	8	0	0	0.00	8
South San Francisco	0	1	0.00	3	0	0	0.00	3
Totals	0.00	16.00	0.00	19.00	0.00	0.00	0.00	20.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request. However, please take into consideration that this amount is most likely to stay the same or decrease

				Redwood City		City of San Mateo		County of San Mateo		South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	%	Requested	%	Requested	%	Requested	Pgm%	Requested
Labor Lines needed: <input type="text" value="8"/>													
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>													
Director of Programs	\$114000	36.00%	41040	0.61%	250	0.61%	250	1.22%	500	0.61%	250	3.05%	\$1,250.00
Rebuild Day Manager	77000	99.00%	76230	4.72%	3600	6.03%	4600	11.28%	8600	2.10%	1600	24.14%	\$18,400.00
Intake Specialist	50186	50.00%	25093	1.83%	460	1.39%	350	1.99%	500	1.00%	250	6.22%	\$1,560.00
Sr. Repair Technician	84000	5.00%	4200	2.38%	100	2.38%	100	2.38%	100	2.38%	100	9.52%	\$400.00
Repair Technician	72800	5.00%	3640	2.75%	100	2.75%	100	2.75%	100	2.75%	100	10.99%	\$400.00
Office and Facilities Coordinator	70000	1.00%	700	14.29%	100	14.29%	100	14.29%	100	14.29%	100	57.14%	\$400.00
Safe at Home Manager (back up)	81500	1.00%	815	12.27%	100	12.27%	100	12.27%	100	12.27%	100	49.08%	\$400.00
All other staff	668000	19.00%	126920	0.00%	0	0.00%	0	0.00%	0	0.00%	0	0.00%	\$0.00
Taxes/Benefits	\$284,040	37.00%	\$105,095	1.12%	\$1,178.00	1.42%	\$1,492.00	2.00%	\$2,100.00	0.59%	\$625.00	5.13%	\$5,395.00
Supplies Lines needed: <input type="text" value="4"/>													
Repairs and Renovations (cash)	\$1,100,000	30.00%	\$330,000	10.11%	\$33,378.00	17.31%	\$57,125.00	27.38%	\$90,356.00	5.46%	\$18,014.00	60.26%	\$198,873.00
Outreach/Volunteer costs	\$161,971	49.00%	\$79366	0.13%	100	0.63%	\$500	0.38%	\$300	0.38%	\$300	1.51%	\$1,200.00
all other program costs	\$473891	27.03%	\$128105	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0	0.00%	\$0.00
Mileage	31086	59.00%	18341	0.55%	100	2.73%	500	1.64%	300	1.64%	300	6.54%	\$1,200.00
Materials Lines needed: <input type="text" value="0"/>													
Operations/Maintenance Lines needed: <input type="text"/>													
Agency Administration	490271	28.75%	140932	4.20%	5920	6.94%	\$9783	10.97%	15458	2.31%	3261	24.42%	\$34,422.00
Indirect Costs Rate													
Indirect Costs	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
TOTAL	\$3,758,745.0	28.75%	\$1,080,477.0	4.20%	\$45,386.00	6.94%	\$75,000.00	10.97%	\$118,514.00	2.31%	\$25,000.00	24.42%	\$263,900.00
Amount Funded 2025					\$45386		\$75000		\$118514		\$25000		
Number of Individual Beneficiaries					0.00		0.00		0.00		0.00		0.00
Cost per Individual													
Number of Household Beneficiaries					3		6		8		3		20.00
Cost per Household					\$15,128.67		\$12,500.00		\$14,814.25		\$8,333.33		\$13,195.00

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

Personnel costs include staff time for the management of minor home repairs at 49 households across 4 jurisdictions from July 2025 to June 2026. Staff include RTP's Director of Programs to oversee the program and its staff, the NRD Manager who manages the projects and the volunteer groups, and the Intake Specialist who manages the processing of client paperwork and eligibility.



Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are current before submitting Renewal Application

- ☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors [1. CDBG resolution 2025 with BOD member approvals.pdf](#)
- ☒ 2. Proof of 501(c)3 / tax-exempt status [2. 501c3.pdf](#)
- ☒ 3. By-laws [3. By-laws Resolution 11-17-11.pdf](#)
- ☒ 4. Articles of Incorporation [4. Articles of Incorporation original and amendments.pdf](#)
- ☒ 5. Board roster, including:
 - Name, Company, Years on Board
 - Meeting dates for previous 12 months
 - Number of years allowed for each board term[5. Board Roster 2024-25.pdf](#)
- ☒ 6. Organizational chart for entire organization [RTP_Org_Chart_Oct_2023.pdf](#)
- ☒ 7. Certified financial audit no more than 1 fiscal year old, prepared by a CPA:
 - Management letters[7. RTP 23 FINAL FS.pdf](#)
- ☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit. [Single Audit Not required 1.3.25.pdf](#)
- ☒ 9. The following are required:
 - Current (FY24-25) **Agency** Operating Budget [Final Budget FY25 - RTP_agencywide.pdf](#)
 - Proposed (FY25-26) **Agency** Operating Budget [Final Budget FY25 - agency and NRD.pdf](#)
 - Current (FY24-25) **Program** Operating Budget [RTP FY26 draft_agencybudget.pdf](#)
 - Proposed (FY25-26) **Program** Operating Budget [RTP FY26 draft_agency and NRD budget.pdf](#)
- ☒ 10. Mission Statement [10. RTP Mission Statement 1.21.25.pdf](#)
- ☒ 11. Non-discrimination policy [11. and 12. Non discrimination and accomodations handbook excerpt 12.2024.r](#)
- ☒ 12. Reasonable Accommodations Policy [11. and 12. Non discrimination and accomodations handbook excerpt 12.2024.r](#)
- ☐ 13. Other -

(Your application will be saved)

Reviewed and accepted by City of South San Francisco:

Sign Here:

Certify Application as Complete Approval

Click above to return application to Draft status, and please enter a reason in the box below

status
Redwood City ,No
City of San Mateo ,No
County of San Mateo ,No
South San Francisco ,No

 xyz

Initially submitted: Jan 21, 2025 - 12:36:21

Rebuilding Together Peninsula- Safe at Home

City: [Help with this page](#)

Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

[Return to Main Page](#)**Renewal Application for FY 2025-26**

<input type="text" value="Redwood City"/>	<input type="text" value="City of San Mateo"/>	<input type="text" value="County of San Mateo"/>	<input type="text" value="South San Francisco"/>
Status:	Status:	Status:	Status: Choose: <input type="text" value="v"/>

Comments:

[Email Subrecipients](#)

to see comments from:

[Click Here](#) to see the NOFA Funding Priorities for Redwood City.**GENERAL INFORMATION**

1. Project Title:

2. Project Address: City: Zip:

3. Provide a one sentence project summary:

RTP's Safe at Home program provides critical health and safety related home repair needs for low-income homeowners, including home safety modifications that allow low-income seniors to safely age in place by eliminating the threat of injury or accident, particularly from falling.

4. Organization Name:

Organization Address: City: Zip:

Organization Phone: Website:

Type of Applicant: Does your agency serve: ☐ Persons, or ☒ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:

Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:

Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:

Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: ([Get a UEI #](#)) Federal EIN/TIN Number:

Funding received from:☒ Redwood City ☒ City of San Mateo ☒ County of San Mateo ☒ South San Francisco**10. Project Specific Narrative:** Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

The main objective of the Safe at Home is that low-income homeowners, majority elderly and BIPOC, in San Mateo County have access to free home repair services that enable them to live in a dry, clean, pest-free, ventilated, safe, contaminant-free, maintained, thermally controlled, accessible, and affordable home (the National Center for Healthy Housing's principles of healthy homes).

Activities:

1. Homeowner completes application.
2. RTP reviews the application, verifies eligibility (e.g. location, property taxes paid, income, conflict of interest).
3. RTP previews the home to develop a scope of work, focusing on the principles of healthy housing.

11. Program Changes: Please detail any changes to your program for FY2025.

The operation of RTP's SAH minor home repair program will remain largely the same in FY2025. However, there have been a series of processes that have been clarified or added as a result of a number of discussions between the jurisdictions and RTP from June to September 2024. These discussions resulted in the Minor Home Repair Guidelines (published by the San Mateo County Department of Housing on 9/2/2024). RTP has trained all of its staff on these guidelines and they are now the basis for our program's operations.

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q2)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	0	0	0	5	0	0	0	5.00
City of San Mateo	0	0	0	4	0	1	0	4.00
County of San Mateo	0	0	0	30	0	5	0	30.00

South San Francisco	0	0	0	10	0	1	0	10.00
Totals	0.00	0.00	0.00	49.00	0.00	7.00	0.00	49.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request, However, please take into consideration that this amount is most likely to stay the same or decrease

				Redwood City		City of San Mateo		County of San Mateo		South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	%	Requested	%	Requested	%	Requested	Pgm%	Requested
Labor Lines needed: <input type="text" value="8"/>													
<i>It is recommended that applicants list Job Titles rather than individual employee names</i>													
Director of Programs	\$114,000.00	50.00%	\$57,000.00	0.88%	500	0.70%	400	8.77%	5000	0.88%	500	11.23%	\$6,400.00
Safe at Home Program Manager	\$81,500.00	99.00%	\$80,685	2.48%	\$2,000	0.62%	\$500	6.20%	\$5,000	6.57%	\$5,300	15.86%	\$12,800.00
Sr. Repair Technician	\$84,000.00	98.00%	\$82,320.00	6.92%	\$5,700.00	4.49%	\$3,700.00	30.00%	\$24,700.00	6.32%	\$5,200.00	47.74%	\$39,300.00
Repair Technician	\$72,800.00	98.00%	\$71,344.00	0.14%	\$100.00	0.14%	\$100.00	0.14%	\$100.00	0.14%	\$100.00	0.56%	\$400.00
Intake Specialist	\$50,186	50.00%	\$25,093	1.99%	\$500	1.99%	\$500	25.90%	\$6,500	7.97%	\$2,000	37.86%	\$9,500.00
Rebuild and Special Project Mani	\$77,000.00	1.00%	\$770.00	12.99%	\$100.00	12.99%	\$100.00	12.99%	\$100.00	12.99%	\$100.00	51.95%	\$400.00
Office and Facilities Coordinator	\$70,000.00	1.00%	\$700.00	14.29%	\$100.00	14.29%	\$100.00	14.29%	\$100.00	14.29%	\$100.00	57.14%	\$400.00
All other staff: Volunteer and Outr	\$668,000.00	12.12%	\$80,975	0.00%	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%	\$0.00	0.00%	\$0.00
Taxes/Benefits	\$284,070.00	29.00%	\$82,372.00	2.12%	\$1,750.00	1.64%	\$1,350.00	12.60%	\$10,375.00	3.04%	\$2,500.00	19.39%	\$15,975.00
Supplies Lines needed: <input type="text" value="3"/>													
Mileage	\$31,086.00	41.00%	\$12,745	1.57%	\$200.00	2.35%	\$300	7.85%	\$1,000	3.92%	\$500	15.69%	\$2,000.00
Materials and Subcontractors	\$1,440,182.00	41.00%	\$590,475.00	5.49%	\$32,445.00	3.52%	\$20,776.09	42.37%	\$250,199.00	6.81%	\$40,222.00	58.20%	\$343,642.09
All other costs	\$295,680.00	0.00%	0		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
Materials Lines needed: <input type="text" value="0"/>													
Operations/Maintenance Lines needed: <input type="text"/>													
Agency Administration	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
Indirect Costs Rate	15.00%		15.00%		15.00%		15.00%		15.00%		15.00%		
Indirect Costs	\$490,275.60		\$162,671.85		\$6,509.25		\$4,173.91		\$45,461.10		\$8,478.30		\$64,622.56
TOTAL	\$3,758,779.60	33.18%	\$1,247,150.85	4.00%	\$49,904.25	2.57%	\$32,000.00	27.95%	\$348,535.10	5.21%	\$65,000.30	39.73%	\$495,439.65
Amount Funded 2025													
Number of Individual Beneficiaries					0		0		0		0		0.00
Cost per Individual													
Number of Household Beneficiaries					5.00		4.00		30.00		10.00		49.00
Cost per Household					\$9,980.85		\$8,000.00		\$11,617.84		\$6,500.03		\$10,111.01

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

Personnel costs include staff time for the management of minor home repairs at 49 households across 4 jurisdictions from July 2025 to June 2026. Staff include RTP's Director of Programs to oversee the program and its staff, the Safe at Home Manager who manages projects technicians and secures subcontractors, our Senior Repair Technician and Repair Technician who performs the minor home repairs, and the Intake Specialist who manages the processing of client paperwork and eligibility.

Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are current before submitting Renewal Application

- ☒ 1. Resolution authorizing application and designation of signatory, by the Board of Directors [1. CDBG_resolution_2025_with_BOD_member_approvals.pdf](#)
- ☒ 2. Proof of 501(c)3 / tax-exempt status [2. 501c3.pdf](#)
- ☒ 3. By-laws [3. By-laws_Resolution_11-17-11.pdf](#)
- ☒ 4. Articles of Incorporation [4. Articles_of_Incorporation_original_and_amendments.pdf](#)
- ☒ 5. Board roster, including:
 - Name, Company, Years on Board
 - Meeting dates for previous 12 months
 - Number of years allowed for each board term
- ☒ 6. Organizational chart for entire organization [6. Revised_org_chart_12.2024.pdf](#)
- ☒ 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA: [7. RTP_23_FINAL_FS.pdf](#)
- ☒ 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit. [Single Audit Not required 1.3.25.pdf](#)
- ☒ 9. The following are required:
 - Current (FY24-25) **Agency** Operating Budget
 - Proposed (FY25-26) **Agency** Operating Budget
 - Current (FY24-25) **Program** Operating Budget

[Final Budget FY25 - RTP_agencywide.pdf](#)
[Final Budget FY25 - agency_and SAH.pdf](#)
[RTP_FY26_draft_agencybudget.pdf](#)
[RTP_FY26_draft_agency_and SAH budget.pdf](#)

- Proposed (FY25-26) **Program** Operating Budget

- ☒ 10. Mission Statement
- ☒ 11. Non-discrimination policy
- ☒ 12. Reasonable Accommodations Policy
- ☐ 13. Other -

(Your application will be saved)

[10. RTP Mission Statement 1.21.25.pdf](#)

[Non_discrimination_and_accomodations_12.2024.pdf](#)

[Non discrimination and accomodations 12.2024.pdf](#)

Application Submitted by: Joy Dickinson Date: 01/21/2025

Reviewed and accepted by City of South San Francisco:

Sign Here: Certify Application as Complete Approval
status

Redwood City ,No
City of San Mateo ,No
County of San Mateo ,No
South San Francisco ,No

Save As Draft

Click above to return application to Draft status, and please enter a reason in the box below

Reset

Initially submitted: Jan 21, 2025 - 12:47:09

City Data Services - San Mateo, CA
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Project Sentinel



City:

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Housing Division
Economic & Community Development
Department
PO Box 711
South San Francisco, CA 94083-0711
Phone: (650) 829-6631
Email: cdbg@ssf.net

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Renewal Application for FY 2025-26

<input type="text" value="Redwood City"/>	<input type="text" value="City of San Mateo"/>	<input type="text" value="County of San Mateo"/>	<input type="text" value="South San Francisco"/>
Status:	Status:	Status:	Status: Choose: <input type="text" value="v"/>

Comments:

[Email Subrecipients](#)

to see comments from:
[Click Here](#) to see the NOFA Funding Priorities for Redwood City.

GENERAL INFORMATION

1. Project Title:
2. Project Address: City: Zip:

3. Provide a one sentence project summary:

Throughout San Mateo County Project Sentinel provides comprehensive fair housing services of proactive community outreach and education to home seekers, in place residents and housing providers as well as reactive complaint investigations seeking remedies for victims of housing discrimination.

4. Organization Name:
Organization Address: City: Zip:
Organization Phone: Website:

Type of Applicant: ☒ Non-Profit ☐ Does your agency serve: ☒ Persons, or ☐ Households?

5. Contact Person / Project Administrator: Name: Title: Telephone:
Contact Email: Fax:

6. Name of Agency Director:

7. Fiscal Officer: Name: Email: Telephone:
Fiscal Officer Address: City: Zip:

8. Authorized Signatory: Name: Email: Telephone:
Authorized Signatory Address: City: Zip:

9. SAM/UEI Number: ([Get a UEI #](#)) Federal EIN/TIN Number:

Funding received from:
☒ Redwood City ☒ City of San Mateo ☒ County of San Mateo ☒ South San Francisco

10. Project Specific Narrative: Provide a narrative description of the specific activities to be carried out in FY 2025. This should also include program objectives and key priorities for each specific jurisdiction.

Note: This narrative has been copied from your previous application. Please update if appropriate.

To combat illegal housing discrimination and ensure civil rights protection, Project Sentinel provides comprehensive fair housing services of complaint investigation and enforcement, consultation, information and referral, and community outreach and education. Fair Housing investigations that reveal evidence of illegal discrimination are addressed through education, conciliation, CRD filings, and private litigation. Information and referral services link callers with the most appropriate resources. Education and outreach activities increase the general population and target groups' awareness of the existence and benefits of fair housing. Housing providers (landlords, property managers) are provided with literature and education workshops on fair housing compliance. These services help create and maintain healthy communities and assist San Mateo County, San Mateo City, Daly City, Redwood City, and South San Francisco to comply with CRD's directive to affirmatively further fair housing. Proposed services will be delivered from Project Sentinel's Redwood City office, Monday through Friday from 9AM to 5:00PM, with telephone intake from 9AM to 4PM. 'After-hours' work is scheduled as needed and by appointments. There is no difference in the fair housing services provided to each jurisdiction except for quantity and that is set by funding level. Regardless of funding level no one is denied service.

11. Program Changes: Please detail any changes to your program for FY2025.

N/A

12. Project Beneficiaries/Quantifiable Measurement: Indicate the expected number of beneficiaries to be served by the program. For each response below please indicate both the number of households and number of individuals. [AMI Table](#)

Jurisdiction	Actual Beneficiaries, FY2023		Projected Beneficiaries FY2024		YTD Beneficiaries FY2024 (thru Q2)		Projected Beneficiaries FY2025	
	Individuals	Households	Individuals	Households	Individuals	Households	Individuals	Households
Redwood City	22	7	13	4	4	2	13	4
City of San Mateo	11	6	10	3	11	6	12.00	6.00
County of San Mateo	41	17	25	8	26	10	25	8
South San Francisco	16	5	13	4	0	0	10	4
Totals	90.00	35.00	61.00	19.00	41.00	18.00	60.00	22.00

PROPOSED PROGRAM BUDGET FOR FY 2025-26

It is recommended that use your current allocation amount for your FY 2025-2026 funding request. However, please take into consideration that this amount is most likely to stay the same or decrease

				Redwood City		City of San Mateo		County of San Mateo		South San Francisco		Total Jurisdictions	
Budget Line Item	Agency Total	Pgm%	Program Total	%	Requested	%	Requested	%	Requested	%	Requested	Pgm%	Requested
Labor Lines needed: 3													
It is recommended that applicants list Job Titles rather than individual employee names													
Executive Director	\$176,405	16.00%	\$28,224	1.42%	\$400	2.13%	600	1.95%	550	0.71%	\$200.00	6.20%	\$1,750.00
Fair Housing Director	\$98,176	100.00%	\$98,176	0.66%	\$650	0.81%	\$800	2.34%	\$2,300	0.66%	\$650.00	4.48%	\$4,400.00
Fair Housing Staff	\$565,698	100.00%	\$565,698	1.68%	\$9,500	2.76%	\$15,600	3.71%	\$21,000	1.41%	\$8,000.00	9.56%	\$54,100.00
Taxes/Benefits	\$142,847	82.97%	\$118,516	1.51%	1793.5	2.44%	\$2,890	3.42%	\$4,055	1.27%	\$1,504.00	8.64%	\$10,242.50
Supplies Lines needed: 0													
Materials Lines needed: 0													
Operations/Maintenance Lines needed: 4													
Occupancy (RWC Office)	\$64,038.00	31.38%	\$20,092.00	1.00%	\$200.00	3.83%	\$770.00	4.98%	\$1,000.00	1.37%	\$275.00	11.17%	\$2,245.00
Communications (RWC Office)	\$67,442.00	33.54%	\$22,618.00	0.60%	\$135.50	1.33%	\$300.00	1.33%	\$300.00	0.00%		3.25%	\$735.50
Equipment Rental/Maintenance (\$52,893.00	33.86%	\$17,909.00	0.00%		1.68%	\$300.00	0.97%	\$173.00	0.00%		2.64%	\$473.00
Indirect 22%					\$364.48		\$479.13		\$729.83		\$0.00		\$1,573.44
Agency Administration					\$0.00						\$306.65		\$306.65
Indirect Costs Rate													
Indirect Costs	\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00		\$0.00
TOTAL	\$1,167,499.00	74.62%	\$871,233.00	1.50%	\$13,043.48	2.50%	\$21,739.13	3.46%	\$30,107.83	1.26%	\$10,935.65	8.70%	\$75,826.09
Amount Funded 2025					\$15000		\$25000		\$34624		\$12576		
Number of Individual Beneficiaries						13	12.00		25		10		60.00
Cost per Individual						\$1,003.34	\$1,811.59		\$1,204.31		\$1,093.57		\$1,263.77
Number of Household Beneficiaries						4	6.00		8		4		22.00
Cost per Household						\$3,260.87	\$3,623.19		\$3,763.48		\$2,733.91		\$3,446.64

13. Program Narrative: Provide detailed responses to costs such as insurance, admin staff, etc..

The program budget includes the following essential cost components to ensure successful implementation and operational efficiency:

Salaries: Staff salaries represent the largest portion of the budget, supporting both administrative and program-specific roles. These positions are critical for delivering direct services, managing program activities, and maintaining compliance.

Attachments

(Upload Instructions)

ALL attachments below are **REQUIRED** in order to submit your renewal application, and your application WILL NOT be able to be submitted with missing attachments! Please take this into consideration when timing your submission of this application. The documents you need to upload are checked below. If you have other attachments you would like to include, please check the "Other" box below and identify the Attachment in the box. If you are unable to upload any of the attachments, contact the CDBG Manager of the appropriate jurisdiction at least one day prior to submitting your application.

NOTE: Some Attachments have been copied over from your FY2024 application for your convenience. Please review all attachments carefully to make sure they are current before submitting Renewal Application

- | | | |
|-------------------------------------|---|--|
| <input checked="" type="checkbox"/> | 1. Resolution authorizing application and designation of signatory, by the Board of Directors | 2024-25 Board Resolution Authorizing Carole Conn.pdf |
| <input checked="" type="checkbox"/> | 2. Proof of 501(c)3 / tax-exempt status | IRS_non_profit_status_certificate.pdf |
| <input checked="" type="checkbox"/> | 3. By-laws | By-Laws_2011.DOC |
| <input checked="" type="checkbox"/> | 4. Articles of Incorporation | PS_Art_of_Corporation.pdf |
| <input checked="" type="checkbox"/> | 5. Board roster, including: <ul style="list-style-type: none">Name, Company, Years on BoardMeeting dates for previous 12 monthsNumber of years allowed for each board term | Board_Roster_24-25.pdf |
| <input checked="" type="checkbox"/> | 6. Organizational chart for entire organization | 2024_PS_Organization_Chart.pdf |
| <input checked="" type="checkbox"/> | 7. Certified financial audit no more that 1 fiscal year old, prepared by a CPA: <ul style="list-style-type: none">Management letters | 2022_06_Project_Sentinel_Inc - Financial Statements.pdf |
| <input checked="" type="checkbox"/> | 8. Federal Single Audit: 2 CFR part 200, Subpart F Single Audit (for entities that receive more than \$750,000 in federal funding) OR A letter from your Executive Director or Corporate Financial Officer certifying that agency does not receive more than \$750,000 in federal funds and is not subject to the Single Audit. | No_Single_Audit_Certification.doc |
| <input checked="" type="checkbox"/> | 9. The following are required: <ul style="list-style-type: none">Current (FY24-25) Agency Operating BudgetProposed (FY25-26) Agency Operating BudgetCurrent (FY24-25) Program Operating BudgetProposed (FY25-26) Program Operating Budget | Mission_Statement.pdf |
| <input checked="" type="checkbox"/> | 10. Mission Statement | Notice_of_Non_Discrimination_Equal_Employment_Opportunity_Policy.doc |
| <input checked="" type="checkbox"/> | 11. Non-discrimination policy | reasonable_accommodation_statement.doc |
| <input checked="" type="checkbox"/> | 12. Reasonable Accommodations Policy | ACCESSIBILITY_FOR_PERSONS_WITH_DISABILITIES.pdf |
| <input checked="" type="checkbox"/> | 13. Other - 2526 Budget | Conflict_of_Interest.docx |
| | | PS_Project_Budget_Worksheet_FY2526.xls |

(Your application will be saved)

Reviewed and accepted by City of South San Francisco:

Sign Here:

Click above to return application to Draft status, and please enter a reason in the box below

status
Redwood City ,No
City of San Mateo ,No
County of San Mateo ,No
South San Francisco ,No

 xyz

Initially submitted: Jan 13, 2025 - 14:07:49